

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com.

OFFICIAL USE *CA/PO*

7006 3230 0003 0729 7890

Postage	\$	<i>8/27/09</i> Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total	Gary MacDugal Great Lakes Wholesale & Marketing, LLC 3729 Patterson Avenue, S. E. Grand Rapids, MI 49512-4024	
Street or PO-Box	DOCKET NO.: CAA-08-2009-0024	

PS Form 3811, August 2006

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Aug 28 2009

Gary MacDugal
 Great Lakes Wholesale & Marketing, LLC
 3729 Patterson Avenue, S. E.
 Grand Rapids, MI 49512-4024

DOCKET NO.: CAA-08-2009-0024

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COMPLETE THIS SECTION ON DELIVERY

A. Signature *Cheryl Rogers* Agent Addressee

B. Received by (Printed Name) *Cheryl Rogers* C. Date of Delivery *8/31*

D. Is delivery address different from Item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article (Item) *7006 3230 0003 0729 7890*

CA/PO

PS Form 3811, February 2004

Domestic Return Receipt

102516-02-01-1580