

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:

Mr. Scott D. Hubbard
Attorney for paragon firstronic of NA Corp
Warner Norcross & Judd LLP
900 fifth Third Center
111 Lyon Street, N.W.
Grand Rapids, Michigan 49503

EPORA-05-2008-0022

2. Article Number
(Transfer from service label)

7001 0320 0006 0189 4847

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature *Scott D. Hubbard* **RECEIVED**
X **Gordon Grevenstuk** Agent
 Addressee

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

**REGIONAL HEARING CLERK
U.S. ENVIRONMENTAL
PROTECTION AGENCY
JUL 07 2008**

3. Service Type

- Certified Mail Express Mail
- Registered Return Receipt for Merchandise
- Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes