ORIGINAL

RECEIVED-FPSC

05 JAN 27 AM 9: 37

COMMISSION CLERK

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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. 	A. Beleived by (Please Print Gearly) B. Date of Delivery C. Signature X Frenk Fe-9 Agent Addressee
JirehCom, Inc. Mr. Patrick D. Crocker 900 Comerica Building	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
Kalamazoo MI 49007-4719 βSC-06-005 -ω-TI-	3. Service Type Certified Mail Registered Insured Mail C.O.D.
2. Article Number	4. Restricted Delivery? (Extra Fee)
(Transfer from service	004 5751 1312
PS Form 3811, March 2001 Domestic Retu	urn Receipt 102595-01-M-1424

COM	
	- <u> </u>
SGA	

CMP ____

DOCUMENT NUMBER-DATE

00827 JAN 278

FPSC-COMMISSION CLERK