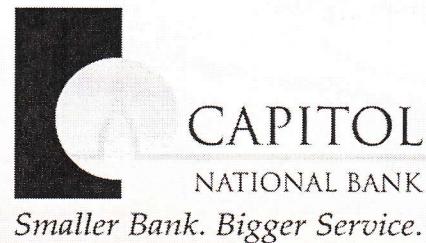


Direct inquiries to:
200 Washington Square North
P.O. Box 26068
Lansing, Michigan 48909-6068
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The Mandatory Poster Agency, Inc.
Postage Account
6323 West Saginaw Suite E
Lansing MI 48917

Page 1 of 4
Nov 01, 2011 - Nov 30, 2011
Account Number: 3056844

Checking Account

Your Primary Account At-A-Glance

Account Type: Business Checking

Account Number: 3056844

**Account Title: The Mandatory Poster Agency, Inc.
Postage Account**

Beginning Balance	\$ 4,038.39	Days in the Statement Cycle	30
4 Deposits & Additions	\$ 265,000.00	Average Daily Balance	\$ 9,582.37
Interest Paid	\$ 0.00	Average Collected Balance	\$ 9,582.37
Checks Posted	\$ 0.00		
ATM & Debit Card Transactions	\$ 0.00		
13 Other Withdrawals	\$ 233,728.86		
Service Charges	\$ 17.55		
Ending Balance	\$ 35,291.98		

Overdraft/Return Item Fee's

Type of Fee	Total This Period	Total YTD
Total Overdraft Fees	\$ 30.00	\$ 90.00
Total Returned Item Fees	.00	.00

Service Charge Detail

Description	Amount (\$)
Variable Service Charge	7.35
Balance Credit in Service Chg	1.96-
Per Check/Debit Fee	2.16
Monthly Maintenance Fee	10.00

HERE IS HOW TO BALANCE OUR RECORDS WITH YOUR CHECKBOOK

1. Sort your checks by number or date of issue. Compare them with your check register or check stubs. Indicate all paid checks with a checkmark.
2. Reduce your checkbook balance by the amount of any service charges not previously deducted.
3. Enter the balance shown on this statement on Line 1 of the balance form below.
4. Enter any deposits made after the date of this statement on Line 2 of the balance form and add them to the statement balance.
5. List and total all checks issued but not paid in the "Checks Outstanding" columns below. Enter this total on Line 3 of the balance form and subtract.
6. The remaining balance should be the same as your checkbook balance. If the final balances do not agree, recheck the accuracy and completeness of all entries and computations. Any irregularity on the statement should be reported to the bookkeeping department at once. If no error is reported in ten days, the account will be considered correct.

CHECKS OUTSTANDING				BALANCE FORM	
Check Number or Date of Issue	AMOUNT	Check Number or Date of Issue	AMOUNT	Enter balance shown on this statement here ----- Line 1	
				Add any deposits made after the date of this statement here _____ Line 2	
				(Use this space for any additional deposits made)	
				Total of Line 1 and Line 2	
				Enter total of checks outstanding and subtract here ----- Line 3	
Total and forward to next column				Your checkbook should show this BALANCE!	

OBJECTIONS TO ENDORSEMENTS not made within thirty days from date of discovery of irregularity and all other objections to said vouchers or to any item of such statement for any cause (whether then unknown or known) not made within thirty days from the last date covered by such statement shall be absolutely barred and waived.

DISCLOSURE TO THIRD PARTIES. We shall not disclose any information to third parties, pertaining to your accounts, except when necessary to complete transfers in order to comply with government or court orders under the Right to Financial Privacy Act of 1978, or in accordance with your written instruction.

IN CASE OF ERRORS OR QUESTIONS ABOUT ELECTRONIC TRANSFERS

Call or write to us as soon as you can. If you think your statement or receipt is wrong or if you need more information about a transfer on the statement or the receipt. Our address and telephone number are listed on the front of this statement. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

(1) Tell us your name and account number (if any)
(2) Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe there is an error or why you need more information.
(3) Tell us the dollar amount of the suspected error.

(3) Tell us the dollar amount of the suspected error.
We will determine whether an error occurred within 10 business days (20 business days for new accounts) after we hear from you and will correct any error promptly. If we need more time, however, we may take up to 45 days to investigate your complaint or question (90 days on new accounts, point-of-sale debit card transactions, and transfers initiated out of state). If we decide to do this, we will credit your account within 10 business days (20 business days for new accounts) for the amount you think is in error, so that you will have use of the money during the time it takes us to complete our investigation. If we ask you to put your complaint or question in writing and we do not receive it within 10 business days, we may not credit your account.

We will tell you the results within three business days after completing our investigation. If we decide that there was no error, we will send you a written explanation.

You may ask for copies of the documents that we used in our investigation.

HOW WE COMPUTE FINANCE CHARGES ON YOUR REVOLVING LINE OF CREDIT:

HOW WE COMPUTE FINANCE CHARGES ON YOUR REVOLVING LINE OF CREDIT:
Finance Charges are imposed on advances as of the date of posting and continue to accrue until paid in full. We calculate the Current Finance Charge on your account by multiplying the Daily Periodic Rate by the Average Daily Balance on your statement including current transactions and then multiplying by the Days in the statement cycle. To get the Average Daily Balance we take the beginning balance of your account each day, add any new advances or other debits for that day, and subtract any payments or credits and any unpaid Finance Charges. This gives us the daily balance. Then we add up all the daily balances for the statement cycle and divide by the Days in the statement cycle. This gives us the Average Daily Balance. The billing cycle ends on the Closing Date. If your account is subject to a variable interest rate, your periodic rate may vary.

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR REVOLVING LINE OF CREDIT BILL

If you think your bill is wrong, or if you need more information about a transaction on your bill, write us on a separate sheet of paper at our address shown on the front of this statement as soon as possible. We must hear from you no later than 60 days after we sent you the first bill on which the error or problem appeared. You can telephone us, but doing so will not preserve your rights. In your letter give us the following information: 1) your name and account number, 2) the dollar amount of the suspected error, and 3) describe the error and explain, if you can, why you believe there is an error. If you need more information, describe the item you are unsure about.

You do not have to pay any amount in question while we are investigating, but you are still obligated to pay the parts of your bill that are not in question. While we are investigating your question, we cannot report you as delinquent or take any action to collect the amount you question.

This Account is subject to the terms and conditions and limitations appearing in the depositor's contract on the signature card. The bank disclaims responsibility for any error in, or improper charge to, the account as rendered unless informed in writing within sixty days of the delivery or mailing any statement or cancelled vouchers.

PINLESS DEBIT CARD TRANSACTIONS

We may process certain transactions as a PINless debit card transaction. A PINless debit card transaction occurs when you enter your Visa Check Card or Visa Debit Card number and the transaction is posted to your account as an ATM Withdrawal or Debit Card Purchase without PIN authentication. Examples of transactions that may be PINless include, but may not be limited to, government payments, utilities, and property management transactions. Any transaction processed as a PINless debit card transaction is not covered by the provisions of the Visa cardholder agreement and do not qualify for rewards and/or Visa's Zero Liability policy.



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Page 3 of 4
Nov 01, 2011 - Nov 30, 2011
Account Number: 3056844



Deposits & Additions

Date Posted	Description	Amount (\$)
11/18	Transfer requested by	40,000.00
11/18	Transfer requested by	80,000.00
11/25	TRANSFER TO POSTAGE ACCT	80,000.00
11/28	Transfer requested by	65,000.00

Other Withdrawals

Date Posted	Description	Amount (\$)
11/01	PAYMENT US POSTAL SERVIC DATE: 111031 CCD	17.40
11/04	PAYMENT US POSTAL SERVIC DATE: 111103 CCD	31.42
11/08	PAYMENT US POSTAL SERVIC DATE: 111107 CCD	17.40
11/14	PAYMENT US POSTAL SERVIC DATE: 111110 CCD	39.31
11/17	PAYMENT US POSTAL SERVIC DATE: 111116 CCD	17.40
11/18	PAYMENT US POSTAL SERVIC DATE: 111117 CCD	79,819.67
11/21	PAYMENT US POSTAL SERVIC DATE: 111118 CCD	33,349.27
11/22	PAYMENT US POSTAL SERVIC DATE: 111121 CCD	6,999.48
11/23	PAYMENT US POSTAL SERVIC DATE: 111122 CCD	21,622.61
11/25	Paid Overdraft Fee	30.00
11/25	PAYMENT US POSTAL SERVIC DATE: 111123 CCD	61,104.56
11/28	PAYMENT US POSTAL SERVIC DATE: 111125 CCD	30,645.54
11/29	PAYMENT US POSTAL SERVIC DATE: 111128 CCD	34.80
11/30	Service Charge - Detail Below*	17.55



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Page 4 of 4
Nov 01, 2011 - Nov 30, 2011
Account Number: 3056844

Daily Balance Summary

Date	Balance (\$)	Date	Balance (\$)	Date	Balance (\$)
11/01	4,020.99	11/18	44,095.79	11/28	35,344.33
11/04	3,989.57	11/21	10,746.52	11/29	35,309.53
11/08	3,972.17	11/22	3,747.04	11/30	35,291.98
11/14	3,932.86	11/23	17,875.57-		
11/17	3,915.46	11/25	989.87		