

MICHIGAN
ACCOUNTS RECEIVABLE COLLECTION SYSTEM

POST OFFICE BOX 30158
LANSING, MICHIGAN 48909

██████████
██████████
NILES MI ██████████

Date: November 24, 2003

Account No: ██████████

Contact Telephone No(s):

Lansing: 313-897-0022

All Others: 1-866-754-8649

Your account has been referred to the Michigan Accounts Receivable Collection System (MARCS), which is operated on behalf of the State of Michigan by GC Services Limited Partnership, a private debt collection company. GC Services Limited Partnership employees at the Michigan Accounts Receivable Collection System (MARCS) site are representatives of the Michigan Department of Treasury authorized to collect delinquent taxes owed to the State. To avoid further collection activity, send your payment in full along with a copy of the State's notice in the enclosed envelope immediately.

You have previously received a final demand letter from the Michigan Department of Treasury summarizing your account. If you have questions about your account, you should call one of the numbers listed above. If you dispute the validity of the account data, or any portion of the amount you owe, in writing within 30 days after the receipt of this letter, we will mail verification of the account to you. If you do not dispute the validity of the account data set forth above, or any portion of it, within 30 days, we will assume that it is valid. This is an attempt to collect amounts due to the State and any information obtained will be used by GC Services Limited Partnership, only for that purpose.

Sincerely,



Collection Manager

LT-91P-B 13

Letter G-1091 (MARCS)

Enclosures:

Attachment
Envelope

STATE OF MICHIGAN
DEPARTMENT OF TREASURY
COLLECTION DIVISION
P.O. BOX 77437
DETROIT

C4748

MI 482770437

DATE: 11/22/03
ACCOUNT NO: [REDACTED]
CONTACT TELEPHONE NUMBER:
800-950-6227

[REDACTED]
[REDACTED]
NILES

MI [REDACTED]

-Levying against your wages, bank accounts, commissions, or other financial assets.

Expenses incurred by the State in collecting this tax liability will be charged to you.

To avoid enforcement action against you, your check or money order must be made payable to "State of Michigan - CD". Indicate your account number on the payment, and submit it with the lower portion of this notice, using the enclosed envelope.

We hope to hear from you soon. We prefer not to take enforcement action, but must do so if payment is not received, in fairness to the majority of taxpayers who pay on time.

SINCERELY,

Michael Reynolds
ADMINISTRATOR, COLLECTION DIVISION

ENCLOSURES:

RETURN ENVELOPE

ACCOUNT SUMMARY

WWW.TREASURY.STATE.MI.US

RETURN THIS PORTION WITH PAYMENT

04675 11 89:

NAME [REDACTED]	SOC. SEC. : ACCOUNT NO. [REDACTED]
--------------------	---------------------------------------

PLEASE WRITE YOUR CORRECT SOCIAL SECURITY NUMBER HERE _____

WRITE PAYMENT AMOUNT HERE \$ _____

STATE OF MICHIGAN
DEPARTMENT OF TREASURY
COLLECTION DIVISION
POST OFFICE BOX 77437
DETROIT MI 482770437

PAGE 001
C4748

RE: [REDACTED]
[REDACTED]
NILES

MI [REDACTED]

TAX INFORMATION

AS OF 11/14/03 [REDACTED]

ASSESSMENT NUMBER	PERIOD ENDING	TYPE OF TAX	ASSESSED BALANCE
L497248	12/00	SALES TAX	\$ 255.41
L497249	12/01	SALES TAX	\$ 240.62
L849909	12/02	SALES TAX	\$ 193.15
TOTAL AMOUNT DUE			\$ 689.18

THE BILLINGS LISTED HERE ARE THOSE WHICH ARE CURRENTLY DUE AND COLLECTIBLE BY THE MICHIGAN DEPARTMENT OF TREASURY COLLECTION DIVISION. BILLINGS ARE NOT INCLUDED HERE IF INFORMAL HEARINGS OR TAX TRIBUNAL APPEAL RIGHTS HAVE NOT EXPIRED, IF THEY ARE IN LITIGATION, OR IF THEY ARE UNDER ADMINISTRATIVE REVIEW.



STATE OF MICHIGAN
DEPARTMENT OF TREASURY
LANSING

JENNIFER M. GRANHOLM
GOVERNOR

JAY B. RISING
STATE TREASURER

Date: November 24, 2003

Account No: [REDACTED]

LIABILITY INFORMATION - PAGE 1

PERIOD END REFERRAL DATE	ASSESSMENT NUMBER	TYPE OF DEBT	ASSESSED BALANCE	PRIMARY ACCOUNT NUM
12/00	L497248	Sales Tax	\$255.41	[REDACTED]
12/01	L497249	Sales Tax	\$240.62	[REDACTED]
12/02	L849909	Sales Tax	\$193.15	[REDACTED]

SEE ADDITIONAL PAGES FOR MORE ASSESSMENT AMOUNTS

RETURN THIS PORTION WITH PAYMENT

C4575 (6-01)

TOTAL AMOUNT DUE \$689.18

NAME [REDACTED]	ACCOUNT NUMBER [REDACTED]
--------------------	------------------------------

Please Enter Soc. Sec. Number	WRITE PAYMENT AMOUNT HERE \$ _____
-------------------------------	------------------------------------

DOWNLOADED FROM:

***Sovereignty Education and Defense Ministry
(SEDM) Website***

<http://sedm.org>

