## Edgar Filing: Mapes Gregory S - Form 4

Mapes Greg Form 4	ory S										
July 01, 201									PROVAL		
FORM	UNITED STAT			ND EXC D.C. 205		NGE CO	OMMISSION	OMB OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. SECURITIES January 31 2005 Estimated average burden hours per											
(Print or Type	Responses)										
1. Name and A Mapes Greg	Symbol	er Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer					
(Last)	(First) (Middle)		3. Date of Earliest Transaction (Chec				c all applicable)				
(Month/E 613 GRATIOT AVENUE 03/31/2			112010				Director 10% Owner X Officer (give title Other (specify below) below) VP & Treasurer				
			onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
ALMA, MI 48801									fore than One Reporting		
(City)	(State) (Zip)	Table 1	I - Non-D	erivative S	ecuri	ties Acqu	ired, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	any	tion Date, if T C h/Day/Year) (	Transactio Code	4. Securiti n(A) or Dis (Instr. 3, 4 Amount	posed	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common	03/31/2010		$\mathbf{J}^{(1)}$ V	6.0389	A		626.6945	D			
Common	06/30/2010		J <u>(1)</u> V	6.2707	А	\$ 17.99	632.9652	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Addr</b>	ess	Relationships								
I B	Director	10% Owner	Officer	Other						
Mapes Gregory S 613 GRATIOT AVENUE ALMA, MI 48801			VP & Treasurer							
Signatures										
Gregory S. Mapes	07/01/2010									
<u>**</u> Signature of Reporting Person	Date									

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

(1) Dividend reinvestment earnings

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.