Transmission Report

Date/Time Local ID Local Name Company Logo

7-27-06; 6:33AM 253 657 3233 MMA Product Support

This document was confirmed.

(reduced sample and details below)

Document Size Letter-S

July 27, 2006

Marsha Jordan-Gee Group Health Cooperative 700 North Lily Road Olympia, WA 98506 Phone 360-923-7010 Fax 360-923-7099

Ms. Gee,

Per your letter dated 6/30/06 "I have the right to request a reconsideration of this determination". Therefore I am requesting a reconsideration of this determination.

Sincerely,

Elana Laham

Total Pages Scanned : 1 Total Pages Confirmed : 1

No.	Doc	Remote Station	Start Time	Duration	Pages	Mode	Comments	Results
1	245	813609237099	7-27-06; 6:33AM	27"	1/ 1	EC		CP 14.4

Notes :

EC: Error Correct BC: Broadcast Send

CP: Completed HS: Host Scan HF: Host Fax RE: Resend
MP: Multi-Poll
RM: Receive to Memory
HP: Host Print

HR: Host Receive

PD: Polled by Remote
PG: Polling a Remote
DR: Document Removed
FO: Forced Output

FM: Forward Mailbox Doc. WS: Waiting Send

MB: Receive to Mailbox PI: Power Interruption TM: Terminated by user WT: Waiting Transfer