

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF OHIO  
EASTERN DIVISION**

<b>In re:</b>	)	
	)	
<b>CEP HOLDINGS, LLC, <i>et al.</i>,<sup>1</sup></b>	)	<b>Case No. 06-51848</b>
	)	<b>(Jointly Administered)</b>
	)	
	)	
<b>Debtors.</b>	)	<b>Chapter 11</b>
	)	
	)	<b>Honorable Marilyn Shea-Stonum</b>

**AFFIDAVIT OF SUPPLEMENTAL SERVICE**

I, James H. Myers, state as follows:

1. I am over eighteen years of age and I believe the statements contained herein are true based on my personal knowledge. I am employed by BMC Group, Inc., the Notice, Claims and Balloting Agent for the Debtors and Debtors-in-Possession in the above-captioned cases, whose business address is 1330 East Franklin Avenue, El Segundo, California 90245.

2. At the direction of Baker & Hostetler LLP, Counsel for the Debtors and Debtors-in-Possession, copies of the document attached hereto as Exhibit "1" were sent to those persons listed on the Service List attached hereto as Exhibit "A" at the addresses shown thereon and via the mode of service indicated thereon, on the 10<sup>th</sup> day of April, 2007:

Exhibit "1"      **NOTICE REGARDING COVERAGE AND PAYMENT OF CLAIMS  
UNDER THE CEP ACQUISITIONS LLC HEALTH AND WELFARE  
PLAN [union]**

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<sup>1</sup> The Debtors include: CEP Holdings, LLC, Creative Engineered Polymer Products, LLC and Thermoplastics Acquisition, LLC.

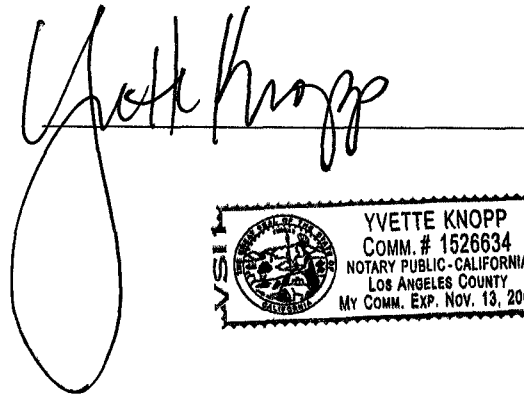
Exhibit "A" Service List regarding Exhibit "1"

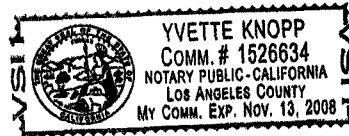
DATED: April 11, 2007  
El Segundo, California

  
James H. Myers

State of California            )  
  ) ss  
County of Los Angeles        )

Personally appeared before me on April 11, 2007, James H. Myers, an individual, known to me to be the person who executed the foregoing instrument and acknowledged the same.





## **EXHIBIT 1**

**Please read this Notice carefully. It contains important information about your health care and dental care coverage under the CEP Acquisitions LLC Health and Welfare Plan.**

*You also may want to share this Notice with your health care and dental care professionals from whom you recently have received services (or will be receiving services) covered under the Plan, especially if a claim for payment for such services has not yet been submitted to the Plan.*

**NOTICE REGARDING COVERAGE AND PAYMENT OF CLAIMS UNDER  
THE CEP ACQUISITIONS LLC HEALTH AND WELFARE PLAN**

**TO: All Former Employees (and their Covered Spouses and Dependents) Who Participated in the CEP Acquisitions LLC Health and Welfare Plan and who were:**

- (1) assigned to work at the Canton, Ohio location and whose terms of employment were subject to a collectively-bargained agreement between the Company and the United Steelworkers of America, AFL-CIO, CLC Local 3610-04; or**
- (2) assigned to work at the Crestline, Ohio location and whose terms of employment were subject to a collectively-bargained agreement between the Company and Local Union No. 563-L of the United Steelworkers of America; or**
- (3) assigned to work at the Middlefield, Ohio location and whose terms of employment were subject to a collectively-bargained agreement between the Company and UNITE HERE Local 1902.**

**RE: Coverage Under the CEP Acquisitions LLC Health and Welfare Plan**

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Creative Engineered Polymer Products, LLC ("CEP"), the plan sponsor of the CEP Acquisitions LLC Health and Welfare Plan (the "Plan") filed for protection from its creditors under Chapter 11 of the U.S. Bankruptcy Code on September 20, 2006, and is in the process of liquidating its assets. As a result, CEP is unable to maintain the Plan. This letter is intended to notify you that CEP received court approval to terminate the Plan for all former CEP employees described in the categories listed above effective as of **April 30, 2007**.

**WHAT DOES THIS MEAN TO YOU?**

**1. If You Did Not Extend Your Health Care Or Dental Care Benefits Under COBRA**

Unless you exercised your rights under the Consolidated Omnibus Budget Reconciliation Act of 1985 ("COBRA") to continue health care and/or dental care benefits when you terminated from employment with CEP (or, if you were not a CEP employee, but are the spouse or dependent of a former CEP employee, upon the employee's termination from employment or other COBRA event), your health care and/or dental care coverage under the Plan ended when the employment with CEP ended. If your health care and dental care coverage has ended, you are receiving this notice primarily as a courtesy. However, in the event that you received health care or dental care services while covered by the Plan but the claim has not yet been submitted to the Plan, please be advised that **no health care or dental care claims for services will be processed or honored if received after August 31, 2007**.

To ensure that your covered claims are processed (and if determined to be covered, paid), your outstanding health care and dental care claims should be submitted to the Plan as soon as possible. Anthem and Delta Dental, respectively, will continue to process claims received by August 31, 2007, to the extent to which the claims are payable under the Plan's terms. We also encourage you to contact your health care and dental care providers to encourage them to submit any outstanding claims to the Plan as soon as possible. Your cooperation with submitting any and all outstanding claims as soon as possible is appreciated.

## **2. If You Exercised Your COBRA Rights To Continue Your Health Care And/Or Dental Care**

Alternatively, if you had elected to continue your health care and/or dental care benefits after your employment with CEP ended (or if you were not a CEP employee, but are the spouse or dependent of a former CEP employee, after the end of the employee's employment with CEP) according to your rights under the Consolidated Omnibus Budget Reconciliation Act of 1985 ("COBRA"), please be advised that **coverage under this Plan will end on April 30, 2007**. No claims for health care or dental care services provided after April 30, 2007 will be honored by this Plan.

However, any health care or dental care claims for services provided on or before April 30, 2007 will continue to be processed by Anthem and Delta Dental, respectively, to the extent to which those claims are payable under the Plan's terms, so long as the claim is received by August 31, 2007. **No claims received after August 31, 2007, will be processed or honored.**

To ensure that your covered claims are processed (and if determined to be covered, paid) by this Plan, you should submit your outstanding health care and dental care claims to the Plan as soon as possible. We also encourage you to contact your health care and dental care providers to encourage them to submit any outstanding claims to the Plan as soon as possible. Your cooperation with submitting any and all outstanding claims as soon as possible is appreciated.

**PLEASE NOTE:** If you have COBRA coverage during April 2007 (and your COBRA rights have not yet expired), you may continue your COBRA coverage after this Plan ends. Separate notices will be mailed to all COBRA participants and beneficiaries providing information on how to continue COBRA coverage.

### **IF YOU HAVE QUESTIONS**

If you have any questions regarding your health care claims, you should contact Anthem at the contact information on your ID card. For additional information, Anthem's website is [www.anthem.com](http://www.anthem.com). If your provider does not submit a claim on your behalf directly to Anthem, claims may be submitted on Anthem's claim form (which may be downloaded from Anthem's website) to: Anthem Blue Cross and Blue Shield, P.O. Box 37180, Louisville, Kentucky 40233-7189.

If you have any questions regarding your dental care claims, you should contact the Customer and Claims Services department at Delta Dental, at 1-800-524-0149. Delta Dental's website is [www.deltadental.com](http://www.deltadental.com). Dental claims may be submitted to: Delta Dental, P.O. Box 9085, Farmington Hills, Michigan 48333-9085.

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## **EXHIBIT A**

# for CEP HOLDINGS, LLC, et al.

Total number of parties: 22

## Exhibit A - CEP Holdings

Svc Lst	Name and Address of Served Party	Mode of Service
24190	ALEXANDER, GARY, 750 SOUTH FREEDOM AVE, ALLIANCE, OH, 44601	US Mail (1st Class)
24190	CLUTTER, LLOYD B, 1341 VERMONT PL NE, CANTON, OH, 44714	US Mail (1st Class)
24190	DOTSON, ROBERT L, 514 16TH NE, CANTON, OH, 44714	US Mail (1st Class)
24190	EDWARDS, STEVEN, 14101 IOWA AVE, PO BOX 42, LIMAVILLE, OH, 44640	US Mail (1st Class)
24190	GARDNER, LARRY A, 2081 CANYON RD SE, CARROLLTON, OH, 44615	US Mail (1st Class)
24190	GATES, DANIEL L, 109 14TH ST, CANTON, OH, 44703	US Mail (1st Class)
24190	HARSH, KAREN, 1501 MATTIE SE, CANTON, OH, 44707	US Mail (1st Class)
24190	HAWKINS, DEBORAH J, 313 BEECHWOOD ST, APT A, LOUISVILLE, OH, 44641	US Mail (1st Class)
24190	HOEBEKE, TRACEY L, 16315 SALEM CH NE, ALLIANCE, OH, 44601	US Mail (1st Class)
24190	JONES, DAVIDA, 2204 SNYDER AVE NE, CANTON, OH, 44714	US Mail (1st Class)
24190	KESTER, DONNA J, 1211 9TH ST NE, CANTON, OH, 44705	US Mail (1st Class)
24190	LAB SR, DAVID, 115 WARNER RD NE, CANTON, OH, 44704	US Mail (1st Class)
24190	LEBEAU, JOHN M, 332 20TH ST SE, PO BOX 1587, MASSILLON, OH, 44648	US Mail (1st Class)
24190	LITTLE, LARRY G, 3418 MEHAFFIE DR NE, CANTON, OH, 44721	US Mail (1st Class)
24190	LYTLE, ROBBIE S, 3217 13TH ST SW, CANTON, OH, 44710	US Mail (1st Class)
24190	MAYLE, CRISSIE, 441 GOBEL NE, CANTON, OH, 44704	US Mail (1st Class)
24190	NESPECA, POLLY J, 760 KLINGER AVE APT C, ALLIANCE, OH, 44601	US Mail (1st Class)
24190	PIPERO, DIANNE, 951 NOBLE ST, ALLIANCE, OH, 44601	US Mail (1st Class)
24190	ROUSH, MARYBETH, 3415 31ST ST NE, CANTON, OH, 44705	US Mail (1st Class)
24190	STEELE, STEVE D, 2601 42ND ST NW, CANTON, OH, 44709	US Mail (1st Class)
24190	TULLOS, CHRISTINE A, 1202 GRANDVIEW AVE S, CANTON, OH, 44710	US Mail (1st Class)
24190	WEAVER, MICHAEL J, 3156 SHEILA ST NW, MASSILLON, OH, 44646	US Mail (1st Class)

Subtotal for this group: 22