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PACKAGING

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January 15, 1997

Office of Employee Benefits Security
Labor Management Service Administration
U.S. Department of Labor
Washington, D.C. 20216

Re: Notice of Plan(s) of Deferred Compensation

Gentlemen:

Pursuant to DOL Reg. Sec. 2520.104-23, the undersigned employer hereby files the following information with respect to its plan(s) of deferred compensation.

1. Name and Address of Employer:

Great Lakes Triad
1151 Sheldon, SE, Grand Rapids, MI 49507

2. Federal Employer Identification No. (EIN):

38-2048035

3. The Employer maintains 1 plan(s) of deferred compensation primarily for the purpose of providing deferred compensation to a select group of management or highly-compensated employees.

4. 3 employee(s) is/are covered by such plan(s).

Very truly yours,

By James P. Burns, President
Great Lakes Triad

Great Lakes Triad Packaging Corporation

1151 Sheldon Avenue S.E. • Grand Rapids, MI 49507 • (616) 241-6441 • FAX (616) 241-4145