

933-0-424424

FOR POST OFFICE USE ONLY ENTERED IN DIRECTORY	INITIALS OF CLERK <i>ye</i>	INITIALS OF CARRIER	BOX NO. <i>6225</i>
THE FOLLOWING MUST BE COMPLETED AND SIGNED BEFORE P.O. BOX IS ASSIGNED			
DELIVER MAIL IN ACCORDANCE WITH INSTRUCTIONS CHECKED BELOW			
<input type="checkbox"/> ALL EXCEPT SPECIAL DELIVERY IN BOX	<input checked="" type="checkbox"/> ALL INCLUDING SPECIAL DELIVERY IN BOX	<input type="checkbox"/> ONLY MAIL ADDRESSED TO BOX IS TO BE PLACED IN IT.	
<input type="checkbox"/> OTHER INSTRUCTIONS (Explain)		<input type="checkbox"/> ALL OTHER MAIL TO BE DELIVERED AS ADDRESSED.	
SPECIAL DELIVERY MAIL ONLY (Check one checked below)			
<input type="checkbox"/> DELIVER TO LOCAL RESIDENCE AT (No., street, and name)	<input type="checkbox"/> DELIVER TO LOCAL BUSINESS ADDRESS AT (No., street, and name)		
NAME OF PERSONS ENTITLED TO RECEIVE MAIL THROUGH BOX (If box is rented to a firm, include the full name of each of the members whose mail is to be placed in box)			
<input type="checkbox"/> HAVE READ ITEMS 1 THROUGH 6 ABOVE AND WILL COMPLY WITH THEM.			
X <i>Lee H. Oswald</i> (Signature of applicant)			
APPLICATION FOR POST OFFICE BOX			
POST OFFICE USE ONLY	POST OFFICE NAME <i>E. B. HUBSCH</i>	DATE BOX OPENED <i>OCT 9 - 1952</i>	DATE BOX CLOSED <i>May 14 1953</i> BOX NO. <i>2915</i>
APPLICANT PLEASE NOTE: Completion of this application signifies your written consent to comply with all postal regulations relative to the renting and use of Post Office boxes.			
NAME OF APPLICANT <i>Lee H. Oswald</i>			
NAME OF FIRM OR CORPORATION (If box is rented for use of others)			
ADDRESS			
BUSINESS ADDRESS (No., street, and name)			
HOME ADDRESS (No., street, and name)			
SIGNATURE OF APPLICANT <i>Lee H. Oswald</i>			
DATE OF APPLICATION <i>Oct 9, 1952</i>			

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