

11/23/68

CHANGE OF ADDRESS ORDER

THIS ORDER PROVIDES FOR THE FORWARDING OF MAIL TO NEW ADDRESS. IT IS VALID FOR THE FORWARDING OF MAIL TO NEW ADDRESS FOR THE PERIOD OF 30 DAYS FROM THE DATE OF ISSUANCE. UNLESS YOU OR THE SENDER DIRECT OTHERWISE.

FORWARDED PER MAIL OR REGISTERED MAIL

FORWARDED PER MAIL OR REGISTERED MAIL
 REGISTERED MAIL
 REGISTERED MAIL WITH RECEIPT
 REGISTERED MAIL WITH RECEIPT AND RETURN RECEIPT
 REGISTERED MAIL WITH RECEIPT AND RETURN RECEIPT AND POSTAL INSURANCE

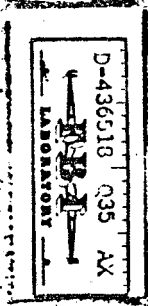
FORWARDED PER MAIL OR REGISTERED MAIL

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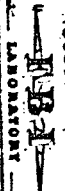


New Orleans

COMPL. OTHER SIDE



NAME	OSWALD, LEE H. SPT 24, R
OLD ADDRESS	PO. BOX 30061 NEW ORLEANS, LA.
NEW ADDRESS	2515 WEST 5th St IRVING, TEXAS
DATE	11/23/63 R. P. L.
SIGN HERE	<i>Lee H. Oswald</i>

D-436518 038 AX

 LABORATORY

DE

For Post Office Use Only ENTERED IN DIRECTORY	INITIALS OF CLERK <i>RJ</i>	INITIALS OF CARRIER	BOX NO. <i>30061</i>
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THE FOLLOWING MUST BE COMPLETED AND SIGNED BEFORE P.O. BOX IS ASSIGNED

DELIVER MAIL IN ACCORDANCE WITH INSTRUCTIONS CHECKED BELOW

EXCEPT SPECIAL DELIVERY IN BOX ALL INCLUDING SPECIAL DELIVERY IN BOX ONLY MAIL ADDRESSED TO BOX IS TO BE PLACED IN IT. ALL OTHER MAIL TO BE DELIVERED AS ADDRESSED.

OTHER INSTRUCTIONS (Explain)

SPECIAL DELIVERY MAIL ONLY (Deliver as checked below)

DELIVER TO LOCAL RESIDENCE AT *657 French St.* DELIVER TO LOCAL BUSINESS ADDRESS AT *657 FRENCH*

(No., street, and name) (No., street, and name)

NAME(S) 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.)

*A. J. Hidell
MARINA OSWALD*

HAVE READ ITEMS 1 THROUGH 5, ABOVE AND WILL COMPLY WITH THEM. *L. H. Oswald* (Signature of applicant)

POD FORM 1093 JUN 11 1963 NEW ORLEANS, LA

U.S. GOVERNMENT PRINTING OFFICE: 1962 O-274237 APPLICATION FOR POST OFFICE BOX

FOR POST OFFICE USE ONLY	POSTMASTER	DATE BOX OPENED <i>6-3-63</i>	DATE BOX CLOSED <i>9-26-63</i>	BOX NO. <i>30061</i>
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APPLICANT PLEASE NOTE: Completion of this application signifies your willingness to comply with all postal rules relative to the renting and use of Post Office boxes.

NAME OF APPLICANT (Print or type) *L. H. Oswald*

NAME OF FIRM OR CORPORATION (If box is rented for use of a firm)

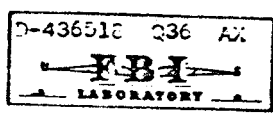
KIND OF BUSINESS *Bank closed 9-26-63 RD*

BUSINESS ADDRESS (No., street, and name)

HOME ADDRESS (No., street, and name)

657 French St. New Orleans

SIGNATURE OF APPLICANT *L. H. Oswald* DATE OF APPLICATION *June 3*



2-22