

Harry D. Holmes Exhibit 6

POSTAGE WILL BE PAID BY ADDRESSEE

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

NAME OF ADDRESSEE **JACK RUBY**

NAME OF BUSINESS OR FIRM **EARL PRODUCTS**

TYPE OF BUSINESS **MERCHANDISING**

STREET ADDRESS **228 S. EWING**

CITY ADDRESS **228 S. EWING**

NAME OF APPLICANT **Jack Ruby**

DATE OF APPLICATION **11/7/68**

POST OFFICE BOX NO. **5475**

NO. OF COPIES TO BE DELIVERED AND DATED BEFORE P.O. BOX IS APPROVED

MAIL IS ACCEPTED FOR DELIVERY ON MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY SATURDAY SUNDAY

ALL OTHER MAIL TO BE DELIVERED AS APPROVED

DELIVER TO LOCAL OFFICE OF **228 S. EWING** DELIVER TO LOCAL OFFICE NEAREST BY **St. Louis, Missouri**

NAME OF BUSINESS OR FIRM (If box is mailed to other, indicate the full name of each of the business where mail is to be placed as well)

HAVE READ ITEMS 1 THROUGH 5 ABOVE AND WILL COMPLY WITH THEM

Jack Ruby
NAME OF APPLICANT
APPLICATION FOR POST OFFICE BOX

POST OFFICE BOX NO. **1093**

U.S. GOVERNMENT PRINTING OFFICE: 1967-0-347-000

Harry D. Holmes Exhibit 1

FOR POST OFFICE USE ONLY	FORWARDER	DATE BOX OPENED NOV - 1 1963	DATE BOX CLOSED	BOX NO. 6225
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APPLICANT PLEASE NOTE: Completion of this application signifies your agreement to comply with all postal rules relative to the routing and use of Post Office boxes.

NAME OF APPLICANT (Print or type)
LEE H. OSWALD

NAME OF FIRM OR CORPORATION (If box is rented for use of other)
FAIR PLAY FOR CUBA COMMITTEE
AMERICAN CIVIL LIBERTIES UNION

KIND OF BUSINESS
None Profit

BUSINESS ADDRESS (No., street, and zone)

HOME ADDRESS (No., street, and zone)

SIGNATURE OF APPLICANT
X Lee H. Oswald

DATE OF APPLICATION
Nov. 1, 1963

2-22-63

Harry D. Holmes Exhibit 3

FOR POST OFFICE USE ONLY	POST OFFICE NAME L. MURSON	DATE BOX OPENED OCT 9 - 1962	DATE BOX CLOSED MAY 1 1963	BOX NO. 275
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APPLICANT PLEASE NOTE: Completion of this application signifies your willingness to comply with all postal rules relative to the routing and use of Post Office boxes.

NAME OF APPLICANT (Print or type)
LEE H. OSWALD

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

HOME ADDRESS

BUSINESS ADDRESS (No., street, and name)

HOME ADDRESS (No., street, and name)

3519 FAIRMORE W. Dallas Texas
SIGNATURE OF APPLICANT
X L. Oswald

DATE OF APPLICATION
Oct 9, 1962