

7 (U) **POST OFFICE DEPARTMENT**  
OFFICIAL BUSINESS

--- SUPPORT ---  
**THE HEART FUND**

PENALTY FOR PRIVATE USE TO AVOID  
PAYMENT OF POSTAGE, \$300

POSTMARK OF  
DELIVERING OFFICE

INSTRUCTIONS: Fill in items below and complete instructions on other side, if applicable. Moisten gummed ends, attach and hold firmly to back of article. Print on front of article RETURN RECEIPT REQUESTED.

**RETURN TO** ↙

REGISTERED NO.	NAME OF SENDER <i>Harold Weisberg</i>
CERTIFIED NO. <i>296513</i>	STREET AND NO. OR P. O. BOX
INSURED NO.	CITY, STATE, AND ZIP CODE <i>Hyattstown Md 20734</i>

POD Form 3811 Sep. 1963

C55-16-71548-6-F

**INSTRUCTIONS TO DELIVERING EMPLOYEE**

Deliver *ONLY* to addressee       Show address where delivered  
(Additional charges required for these services)

**RECEIPT**

Received the numbered article described on other side.

SIGNATURE OR NAME OF ADDRESSEE (must always be filled in)  
*Alan Livingston*

SIGNATURE OF ADDRESSEE'S AGENT, IF ANY  
*Carl A. Wain*

DATE DELIVERED <i>2/27/67</i>	SHOW WHERE DELIVERED (only if requested)
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C55-16-71548-5-F GPO