

SENDER: Be sure to follow instructions on other side

PLEASE FURNISH SERVICE(S) INDICATED BY CHECKED BLOCK(S)  
(Additional charges required for these services)

Show to whom, date and address where delivered

Deliver ONLY to addressee

RECEIPT

Received the numbered article described below

REGISTERED NO. \_\_\_\_\_ SIGNATURE OR NAME OF ADDRESSEE (Must always be filled in)

CERTIFIED NO.

96 34919

INSURED NO.

1  
2  
Janet Troy  
SIGNATURE OF ADDRESSEE'S AGENT, IF ANY

DATE DELIVERED

9/28/71

3  
SHOW WHERE DELIVERED (Only if requested, and include ZIP Code)

RECEIPT FOR CERTIFIED MAIL—30¢ (plus postage)

No. 634919

SENT TO	D. Frost
STREET AND NO.	90 PARK AVE
P.O., STATE AND ZIP CODE	NEW YORK, N.Y.
OPTIONAL SERVICES FOR ADDITIONAL FEES	
RETURN RECEIPT SERVICES	1. Shows to whom and date delivered ..... 15¢ With delivery to addressee only ..... 65¢
	2. Shows to whom, date and where delivered .. 35¢ With delivery to addressee only ..... 85¢
DELIVER TO ADDRESSEE ONLY	50¢
SPECIAL DELIVERY (extra fee required)	.....



PS Form 3800 Apr. 1971 NO INSURANCE COVERAGE PROVIDED—NOT FOR INTERNATIONAL MAIL (See other side) \* GPO: 1970 O-397-458