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

Show to whom, date and address believe to addressee

RECEIPT
Received the numbered article described below

REGISTERED NO.

SIGNATURE OF NAME OF ADDRESSEE (Must always be filled in)

SIGNATURE OF ADDRESSEE'S AGENT, IF ANY

INSURED NO.

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

SENT TO FACE	POSTMAI OR DAT
STREET AND NO.	Walch
P.O., STATE AND ZIP CODE	(H)
OPTIONAL SERVICES FOR ADDITIONAL FEES RETURN RECEIPT SERVICES 1. Shows to whom and date delivered	THE STATE OF THE S
DELIVER TO ADDRESSEE ONLY 50¢ SPECIAL DELIVERY (2 pounds or less) 45¢	

No. 939599