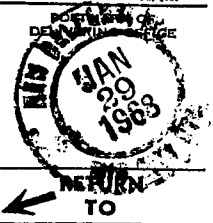
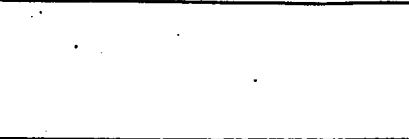


POST OFFICE DEPARTMENT
OFFICIAL BUSINESS

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

65-10-71648-10

POD Form 3811 Apr. 1967



INSTRUCTIONS: Show name and address below and complete instructions on other side, where applicable. Moisten gummed ends, attach and hold firmly to back of article. Print on front of article RETURN RECEIPT REQUESTED.

NAME OF SENDER

Harold Wesley

STREET AND NO. OR P.O. BOX

R-7

POST OFFICE, STATE, AND ZIP CODE FREDERICK, MD. 21701

INSTRUCTIONS TO DELIVERING EMPLOYEE

Show to whom, date, and address where delivered
 Deliver ONLY to addressee
(Additional charges required for these services)

RECEIPT

Received the numbered article described below.

REGISTERED NO.
1858

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

Jim Garrison

CERTIFIED NO.

SIGNATURE OF ADDRESSEE'S AGENT, IF ANY

E. Lynn

INSURED NO.

DATE DELIVERED

SHOW WHERE DELIVERED (only if requested)

1-29-68

65-10-71648-10 GPO