

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.	1	SIGNATURE OR NAME OF ADDRESSEE (Must always be filled in)
CERTIFIED NO. 421 822		SIGNATURE OF ADDRESSEE'S AGENT, IF ANY
INSURED NO.		3
DATE DELIVERED 7/18/68		SHOW WHERE DELIVERED (only if requested)

c55-16-71548-10 GPO

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REGISTERED NO.	1	SIGNATURE OR NAME OF ADDRESSEE (Must always be filled in)
CERTIFIED NO.		SIGNATURE OF ADDRESSEE'S AGENT, IF ANY
INSURED NO.		2
DATE DELIVERED 6-19-68		SHOW WHERE DELIVERED (only if requested)

c55-16-71548-9 GPO

RECEIPT FOR CERTIFIED MAIL—30¢

No. 539534

SENT TO		POSTMARK OR DATE
Mr. s Bill Jerome		
STREET AND NO.		
1740 Jackson Avenue		
P. O., STATE, AND ZIP CODE		
New Orleans, La. 70113		
EXTRA SERVICES FOR ADDITIONAL FEES		
Shows to whom and date delivered	Shows to whom, date, and where delivered	Deliver to Addressee Only
<input type="checkbox"/> 10¢ fee	<input checked="" type="checkbox"/> 35¢ fee	<input type="checkbox"/> 50¢ fee

POD Form 3900 Mar. 1965 NO INSURANCE COVERAGE PROVIDED— NOT FOR INTERNATIONAL MAIL (See other side)

POST OFFICE DEPARTMENT
OFFICIAL BUSINESS

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

POSTMARK OF
DELIVERING OFFICE
JUN 18 1968
M.O. CARRIERS

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.

← RETURN TO

NAME OF SENDER
Weisberg

STREET AND NO. OR P.O. BOX
Pt. # 8

POST OFFICE, STATE, AND ZIP CODE
Fredrick, Md 21701

POD Form 3811 Apr. 1967
e65-16-71648-10

POST OFFICE DEPARTMENT
OFFICIAL BUSINESS

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

POSTMARK OF
DELIVERING OFFICE
8961
61
MDC
RETURN TO

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 WEISBERG

STREET AND NO. OR P.O. BOX
ROUTE #8

POST OFFICE, STATE, AND ZIP CODE
FREDRICK, MARYLAND 21701

POD Form 3811 June 1966
e65-16-71648-9

- Stick postage stamps to your article to pay:
 BASIC CHARGES
 Certified fee—30¢
 Postage (first-class or airmail)
 - If you want this receipt postmarked, stick the gummed stub on the left portion of the address side of the article, *leaving the receipt attached*, and present the article at a post office service window or hand it to your rural carrier. (*no extra charge*)
 - If you do not want this receipt postmarked, stick the gummed stub on the left portion of the address side of the article, detach and retain the receipt, and mail the article.
 - If you want a return receipt, write the certified-mail number and your name and address on a return receipt card, Form 3811, and attach it to the back of the article by means of the gummed ends. Endorse front of article RETURN RECEIPT REQUESTED. (*Fees—10¢ or 35¢.*)
 - If you want the article delivered only to the addressee, endorse it on the front DELIVER TO ADDRESSEE ONLY. (*Fee—50¢*). Place the same endorsement in line 2 of the return receipt card.
 - Save this receipt and present it if you make inquiry.
- OPTIONAL SERVICES
 Return receipt (10¢ or 35¢)
 Deliver to addressee only—50¢
 Special delivery
- * GPO 1968 O-216-700