

FILE COPY

- ACK \_\_\_\_\_
- AFA \_\_\_\_\_
- APP \_\_\_\_\_
- CAF \_\_\_\_\_
- CMU \_\_\_\_\_
- CTR \_\_\_\_\_
- EAG \_\_\_\_\_
- LEG \_\_\_\_\_
- LIN \_\_\_\_\_
- OPC \_\_\_\_\_
- RCH \_\_\_\_\_
- SEC   1
- WAS \_\_\_\_\_
- OTH \_\_\_\_\_

Thank you for using Return Receipt Service.

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

1.  Addressee's Address

2.  Restricted Delivery

Concise postmaster for fee.

3. Article Addressed to: 761473

4a. Article Number: 97-0016

4b. Service Type

- Registered
- Certified
- Express Mail

5.  Insured

6.  Return Receipt for Mails

7. Date of Delivery: DEC 11 1991

8. Address and Address Only requested and fee is 0.00

Signature: [Signature]

PS Form 3811, December 1991 U.S. GPO: 1991-352-714

**DOMESTIC RETURN RECEIPT**



DOCUMENT NO.  
02564-99  
02/05/97