

m 3813

# RECEIPT FOR INSURED MAIL

GPO 5-76252

No. 229

Postage 6 cts.

Insurance fee paid 10 cts.

Fragile -----

Perishable -----

Eggs -----

DOMESTIC (Including Canada and Newfoundland)

FEES	INDEMNITY
5c -----	Value up to \$5
10c -----	Value up to \$25
15c -----	Value up to \$50
25c* -----	Value up to \$100
30c -----	Value up to \$150
35c -----	Value up to \$200

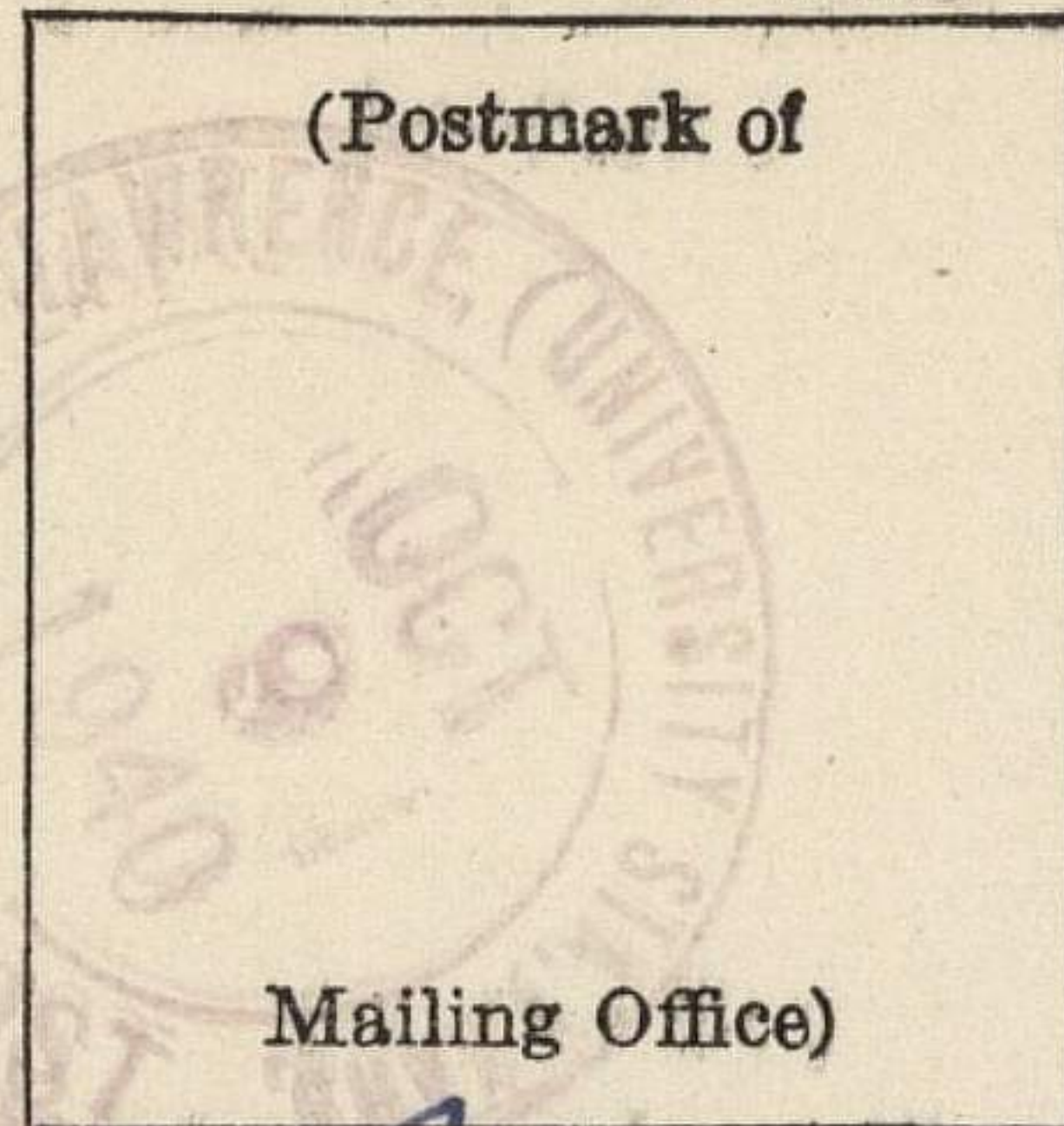
\* Maximum chargeable to Newfoundland. Apply at post office window for information concerning fees applicable to insured mail for foreign countries.

Fee paid for return receipt ----- cts.

Restricted delivery fee ----- cts.

Special delivery fee ----- cts.

Special handling charge ----- cts.



POSTMASTER,

By [Signature]

Accepting employee will place his initials in spaces applicable to indicate endorsements and insert the fees paid.

The sender should write the name of the addressee on back hereof as an identification. Preserve and submit this receipt in case of inquiry or application for indemnity. Indemnity claims must be filed within 6 months from date of mailing.