

Form 3813

RECEIPT FOR INSURED MAIL

CAUTION—Indemnity will not be paid unless this receipt or other equivalent evidence of insurance is submitted.

No. 5423

Postage 16 cts.

Insurance fee 10 cts.

Return receipt cts. Restricted delivery cts.

Special delivery cts. Special handling cts.

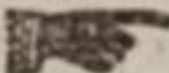
Fragile Perishable

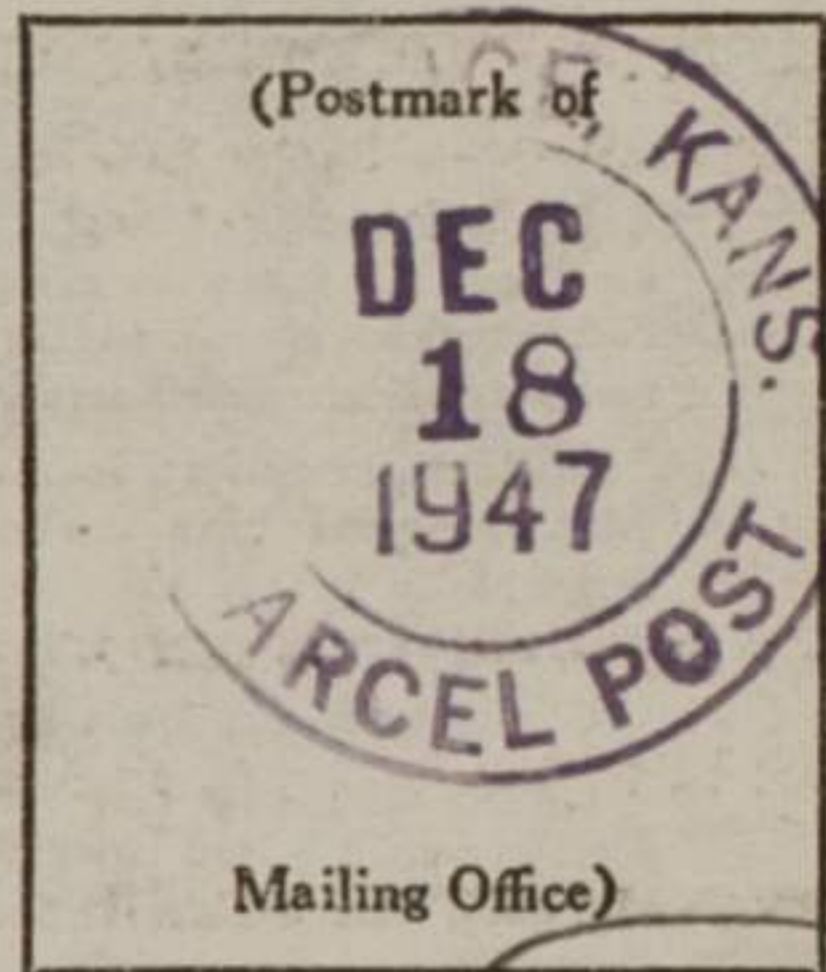
Other endorsement

NOTICE TO SENDER.—Enter below name and complete address of addressee. Show also if addressed in care of person, hotel, etc.

SENT TO

IMPORTANT.—READ OTHER SIDE REGARDING ENDORSEMENTS AND INDEMNITY.

 SAVE THIS RECEIPT UNTIL PARCEL IS ACCOUNTED FOR



c9-16-13285-6

POSTMASTER,

By