Form	3806-S	(Rev.	11-46)

Receipt for Registered Article No.

15067

Fee paid 50 cen	its. Class postage
Declared value 100.	Surcharge paid, \$
Return Receipt fee	Spl. Del'y fee

in person _____, or order _____ Fee paid _____ Accepting employee will place his initials in space indicating restricted delivery.

NOTICE TO SENDER—Enter below name and address of addressee as an identification. Preserve and submit this receipt in case of inquiry or application for indemnity.

(Name of addressee)

Delivery restricted to addressee:

(P. O. and State of address)

Postmaster per

POSTMARI

Registered Mail—Fees for indemnity limited to:

	\$5	20¢	\$300	65¢	\$800	\$1.20	
	50	25¢	400	80¢	900	1.25	
7	75	35¢	500	95¢	1,000	1.35	
M	100	40¢	600	\$1.05			
14	200	554	700	1 15			

The fee on domestic registered matter without intrinsic value and for which indemnity is not paid is 20 cents.

Domestic registered mail is subject to surcharges when the declared value exceeds the maximum indemnity covered by the registry fee paid. Fees on domestic registered C. O. D. mail range from 40 cents to \$1.40. Indemnity claims must be filed within 1 year (C. O. D., 6 months) from date of mailing.

Consult postmaster as to the registry fees chargeable on registered parcel post packages for foreign countries. $_{07-16-19433-1}$

Post Office Department	PENALTY FOR PRI	VATE USE TO A	VOID PAYMENT OF POSTAGE, \$300
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Return to amon &	Car	ter	
Street and Number, or Post Office Box,	er)	- 3	4 Worth In
REGISTERED ARTICLE	0		
INSURED PARCEL F	ORT	W	ORTH,
No			TEXAS.

RETURN RECEIPT

	e Postmaster the Registered or Insured Article, the or ars on the face of this Cardan POST OFFICE.
GO CHESTE Not where a	PENTAGON, WASHINGTON 25, D. C.
1 BYs	
	(Signature or name of addressee)
2 - TX	Muse
(Signature of	addressee's agent—Agent should the addressee's name on line ONE above
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e of delivery	, 194
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