DATE	3. DELIVERY DATE
item I above	
RE OR N	SIGNATURE OR NAME
RECEIPT Received from the Postmaster the Registered, Certified, or Insured Article, the number of which appears on the face of this return receipt.	RECEIPT Received from the Postmaster the Registered, Certified, or Insured Article, the number of which appears on the face of this return receipt.
INSTRUCTIONS TO DELIVERING EMPLOYEE. DELIVER ONLY TO ADDRESSEE (20¢ #dditional) SHOW ADDRESS WHERE DELIVERED IN ITEM 4 BELOW (31¢ additional)	INSTRUCTIONS TO DELIVERING EMPLOYEE DELIVER ONLY TO ADDRESSEE (20¢ additional) SHOW ADDRESS WHERE DELIVERED IN ITEM 4 BELOW (31¢ additional)
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SIGNATURE OF ADDRESSEE'S item 10000)	
35	1. SIGNATURE OF NAME OF ADDRESSEE X A C C C C C C C C C C C C
	RECEIPT Received from the Postmaster the Registered, Certified, or Insured Article, the number of which appears on the face of this return receipt.
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INSTRUCTIONS TO DELIVERING EMPLOYEE DELIVER ONLY TO ADDRESSEE (20% additional) SHOW ADDRESS WHERE DELIVERED IN ITEM 4 BELOW (31¢ additional) RECEIPT Received from the Postmaster the Registered, Certified, or Insured Article, the number of which appears on the face of this return receipt. 1. SIGNATURE OR NAME OF ADDRESSEE X Continue of Addressee's AGEN (Agent should enter addressee's name in item I above). 2. SIGNATURE OF ADDRESSEE'S AGEN (Agent should enter addressee's name in item I above).

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