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Receipt for Certified Mail

OXY, USA, INC. Box 50250 Midland, TX 79710

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| PS Fórm 3811 , December 1994 | 6. Signature: (Addressee/or Agent) X | 5. Received By: (Print Name) | OXY, USA, INC. Box 50250 Midland, TX 79710 | | | | | 3. Article Addressed to: | Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b. 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. | | | | | |
| Domestic Return Receipt | | 8. Addressee's Address (Only if requested and fee is paid) | 7. Date of Delivery 6 1996 | ☐ Return Receipt for Merchandise ☐ COD = | ☐ Express Mail ☐ Insured | ☐ Registered | 4b. Service Type | P326931 960 | | Consult postmaster for fee. | number. 2. Restricted Delivery | 1. Addressee's Address | following services (for an extra fee): | I also wish to receive the |