PS Form 3811, December 1991 *U.S. GPO: 1982-323-402	our RE 6. Gignature (Agent)	TO Signature (Addressee)		DR Carlsbad, New Mexico 88220	S P.O. Box 71	MC Fertilizer, Inc.	p Mr. Walt Thayer	e 3. Article Addressed to:	 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. 	 Attach this form to the front of the mailpiece, or on the back if space does not permit. 	 Complete items 1 and/or 2 for additional services. Complete items 3, and 4a & b. Print your name and address on the reverse of this form so that we can be return this cart to you. 	de SENDER:
DOMESTIC RETURN RECEIPT	Adeline ALN #13,14,15,16, # and #17		7. Date of Defivery	Express Mail Return Receipt for S		Registered Insured Registered	689		number. 2.	1. 🗌 Addressee's Address	e can fee):	

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	Р ПАЗ 929 LA	
	Receipt for Certified Mail No Insurance Coverage Pri Do not use for Internation (See Reverse)	rovided al Mail
	Sent to Mr. Walt Thayer	
	Street and No. IMC Fertilizer, Inc.	
	P.O., State and ZIP Code P.O. Box 71	
	Carlsbad, New Mexico	<mark>→ 88</mark> 22
	Certified Fee	
ſ	Special Derivery Fee	
	Restricted Delivery Fee	
	Return Receipt Showing to Whom & Date Delivered	
	Beturn Receipt Showing to Whom, Date, and Addressee's Address	
	TOTAL Postage & Fees \$	
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PS Form 3800, June	Adeline "ALN" #13-17	

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