

PS Form 3811, July 1983 447-845

<p>SENDER: Complete items 1, 2, 3 and 4.</p> <p>Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. <u>The return receipt fee will provide you the name of the person delivered to and the date of delivery.</u> For additional fees the following services are available. Consult postmaster for fees and check box(es) for service(s) requested.</p>	
<p>1. <input type="checkbox"/> Show to whom, date and address of delivery.</p> <p>2. <input type="checkbox"/> Restricted Delivery.</p>	
<p>3. Article Addressed to:</p> <p><i>Navajo Tribe</i> <i>P.O. Box 146</i> <i>Window Rock, AZ 86515</i></p>	
<p>4. Type of Service:</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail</p>	<p>Article Number</p> <p><i>P-488 634 094</i></p>
<p>Always obtain signature of addressee <u>or</u> agent and <u>DATE DELIVERED.</u></p>	
<p>5. Signature - Addressee</p> <p><i>X</i></p>	
<p>6. Signature - Agent</p> <p><i>X Alfred Sanchez</i></p>	
<p>7. Date of Delivery</p> <p><i>10/20/87</i></p>	
<p>8. Addressee's Address (ONLY if requested and fee paid)</p>	

DOMESTIC RETURN RECEIPT

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<p>1. <input type="checkbox"/> Show to whom, date and address of delivery.</p> <p>2. <input type="checkbox"/> Restricted Delivery.</p>	
<p>3. Article Addressed to:</p> <p><i>Jerome P. McHugh</i> <i>650 S. Cherry #1225</i> <i>Denver, CO 80222</i></p>	
<p>4. Type of Service:</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail</p>	<p>Article Number</p> <p><i>P-488 634 095</i></p>
<p>Always obtain signature of addressee <u>or</u> agent and <u>DATE DELIVERED.</u></p>	
<p>5. Signature - Addressee</p> <p><i>X Linda Heston</i></p>	
<p>6. Signature - Agent</p> <p><i>X</i></p>	
<p>7. Date of Delivery</p> <p><i>10/20/87</i></p>	
<p>8. Addressee's Address (ONLY if requested and fee paid)</p>	

DOMESTIC RETURN RECEIPT