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| Z 137 535 960  |  |  |                           |
| US Postal Service<br>Receipt for Certified Mail                                    |  |  |                           |
| No Insurance Coverage Provided.  |  |  |                           |
| Do not use for International Mail (See reverse)                                    |  |  |                           |
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| Return Receipt Showing to<br>Whom & Date Delivered                                 | -                                      | Restricted Delivery Fee  |                           |
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| Date, & Addressee's Address  | April 1995                             | Return Receipt Showing to Whom,  |                           |
| TOTAL Postage & Fees \$  | <\`                                    | Date, & Addressee's Address  |                           |
| Postmark or Date   | Form <b>3800</b> ,                     | TOTAL Postage & Fees   | S                         |
|  | <b>3</b>                               | Postmark or Date   |                           |
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PS Form 3800, April 1995