

PS Form 3800, June 1985

P 858 061 833

**RECEIPT FOR CERTIFIED MAIL**

NO INSURANCE COVERAGE PROVIDED  
NOT FOR INTERNATIONAL MAIL  
(See Reverse)

Sent to	<i>John O. Peter. Newark.</i>
Street and No.	<i>The Capital</i>
P State and ZIP Code	<i>Clintony ny 12224</i>
Postage	\$ <i>1.67</i>
Certified Fee	\$ <i>1.00</i>
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing Date, and Address of Delivery	
TOTAL Postage and Fees	\$ <i>2.67</i>
Postmark or Date	

238 190 858 P

**RECEIPT FOR CERTIFIED MAIL**

NO INSURANCE COVERAGE PROVIDED  
NOT FOR INTERNATIONAL MAIL  
(See Reverse)

Sent to	<i>Reisman P. R.C.</i>
Street and No.	<i>100 Franklin Ave.</i>
P State and ZIP Code	<i>Green. City ny 10303</i>
Postage	\$ <i>1.67</i>
Certified Fee	\$ <i>1.00</i>
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing Date, and Address of Delivery	
TOTAL Postage and Fees	\$ <i>2.67</i>
Postmark or Date	

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