SENDER: Be sure to follow instructions on other side

PLEASE FURNISH SERVICE(S) INDICATED BY CHECKED BLOCK(S)
(Additional charges required for these services)

☐ Show to whom, date and address where delivered ☐ Deliver ONLY to addressee

RECEIPT
Received the numbered article described below

REGISTERED NO.

CERTIFIED NO. 438658

INSURED NO.

SIGNATURE OR NAME OF ADDRESSEE *(Must always be filled in)*

1 Joan K. Fauble

2 SIGNATURE OF ADDRESSEE'S AGENT, IF ANY

DATE DELIVERED 8-12-74

3 SHOW WHERE DELIVERED *(Only if requested, and include ZIP Code)*

Exhibit
Filed August 21, 1974

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