

ROSENSTOCK, BURGEE, BOWER & PHILLIPS P.A.

COURT SQUARE BUILDING

100 WEST CHURCH STREET

P. O. BOX 648

FREDERICK, MARYLAND 21701

ATTORNEYS

BENJAMIN B. ROSENSTOCK
 RICHARD R. BURGEE
 FREDERICK J. BOWER
 PEYTON PAUL PHILLIPS
 JOSEPH S. WELTY
 RUSSELL T. NORMAN

TELEPHONE 662-6188
 AREA CODE 301

September 11, 1979

CERTIFIED MAIL
 RETURN RECEIPT REQUESTED
 DELIVERY RESTRICTED TO
 ADDRESSEE ONLY

Mrs. Patricia L. Mowry
 Western Maryland Hospital Center
 1500 Pennsylvania Avenue
 Hagerstown, Maryland 21740

Re: Notice of Mortgage Fore-
 closure Sale

Dear Mrs. Mowry:

Enclosed herewith is a copy of the newspaper advertisement setting forth the time, place and terms of the mortgage foreclosure sale being held in connection with the sale of the property to which you now hold legal title and which is located in Buckeystown Election District, Frederick County, Maryland, and is located on Pleasant View Road near Careytown. The said property is being foreclosed by Joseph S. Welty, Assignee of the Farmers and Mechanics National Bank in those Equity proceedings known as No. 29314 Equity in the Circuit Court for Frederick County, Maryland.

Sincerely,

Richard R. Burgee
 RICHARD R. BURGEE
 Attorney for Assignee

JSW/alh

Enclosure: Sale ad

P00 6978994

RECEIPT FOR CERTIFIED MAIL

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

SENT TO Mrs. Patricia L. Mowry Western Maryland Hospital Center 1500 Pennsylvania Avenue Hagerstown, Md. 21740	POSTAGE \$	CERTIFIED FEE \$	SPECIAL DELIVERY \$	RESTRICTED DELIVERY \$	SHOW TO WHOM AND DATE DELIVERED \$	SHOW TO WHOM AND DATE AND ADDRESS OF DELIVERY \$	SHOW TO WHOM AND DATE DELIVERED WITH RESTRICTED DELIVERY \$	SHOW TO WHOM, DATE AND ADDRESS OF DELIVERY WITH RESTRICTED DELIVERY \$	TOTAL POSTAGE AND FEES \$	POSTMARK OR DATE FREDERICK, MD SEP 19 1979
CONSULT POSTMASTER FOR FEES		OPTIONAL SERVICES		RETURN RECEIPT SERVICE	PS Form 3800, Apr. 1976					

P00 6978984

RECEIPT FOR CERTIFIED MAIL

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

SENT TO Mrs. Patricia L. Mowry Western Maryland Hospital Center 1500 Pennsylvania Avenue Hagerstown, Md. 21740	POSTAGE \$	CERTIFIED FEE \$	SPECIAL DELIVERY \$	RESTRICTED DELIVERY \$	SHOW TO WHOM AND DATE DELIVERED \$	SHOW TO WHOM AND DATE AND ADDRESS OF DELIVERY \$	SHOW TO WHOM AND DATE DELIVERED WITH RESTRICTED DELIVERY \$	SHOW TO WHOM, DATE AND ADDRESS OF DELIVERY WITH RESTRICTED DELIVERY \$	TOTAL POSTAGE AND FEES \$	POSTMARK OR DATE FREDERICK, MD SEP 11 1979
CONSULT POSTMASTER FOR FEES		OPTIONAL SERVICES		RETURN RECEIPT SERVICE	PS Form 3800, Apr. 1976					

DATE OF NOTICE 9-14-79
ARTICLE ADDRESSED TO PATRICIA MOWRY 1500 PA AVE HAG, MD 21740
REGISTERED NO. CANNOT BE DELIVERED BECAUSE: <input type="checkbox"/> DELIVERY IS RESTRICTED. ADDRESSEE CAN NOT OR WILL NOT SIGN <input type="checkbox"/> INCORRECTLY ADDRESSED. SUPPLY BETTER ADDRESS IF POSSIBLE <input type="checkbox"/> UNKNOWN. SUPPLY ADDRESS OR FORWARDING DIRECTIONS, IF POSSIBLE <input type="checkbox"/> OTHER <i>Bed Ridden</i>
State below disposition you wish made of this registered article and send this form promptly in an envelope bearing first-class postage to Postmaster at:
DISPOSITION INSTRUCTIONS: <input type="checkbox"/> RETURN TO SENDER <input type="checkbox"/> RESTRICTION LIFTED—DELIVER TO ADDRESSEE'S AGENT <input type="checkbox"/> TRY AT _____ <input type="checkbox"/> OTHER _____
SIGNATURE <i>McLynn</i>
INSURED NO. _____ Postage-Due _____ COD NO. _____ Date Due _____ <input type="checkbox"/> Was refused by you when it was returned as undeliverable. If you do not claim it and pay the above postage-due charges by the date shown above, it will be treated as dead mail. <input type="checkbox"/> Was destroyed/abandoned per directions.
POSTMASTER