SENDER: Complete items 1, 2, and 3.
Add your address in the "RETURN TO" space on reverse.

1. The following service is requested (check one).
- [ ] Show to whom and date delivered ____¢
- [ ] Show to whom, date, and address of delivery ____¢
- [ ] RESTRICTED DELIVERY
  Show to whom and date delivered ____¢
- [ ] RESTRICTED DELIVERY.
  Show to whom, date, and address of delivery $____

(CONSULT POSTMASTER FOR FEES)

2. ARTICLE ADDRESSED TO:
Fug Enterprises, Inc
P.O. Box 174
Rockville, MD 20850

3. ARTICLE DESCRIPTION:
REGISTERED NO. | CERTIFIED NO. 714204 | INSURED NO.

(Always obtain signature of addressee or agent)

I have received the article described above.
SIGNATURE [x] Addressee [ ] Authorized agent

4. DATE OF DELIVERY | POSTMARK

5. ADDRESS (Complete only if requested)

6. UNABLE TO DELIVER BECAUSE: | CLERK'S INITIALS

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

☆ GPO: 1976-272-382

3051

SENDER: Complete items 1, 2, and 3.
Add your address in the "RETURN TO" space on reverse.

1. The following service is requested (check one).
- [x] Show to whom and date delivered ____¢
- [ ] Show to whom, date, and address of delivery ____¢
- [ ] RESTRICTED DELIVERY
  Show to whom and date delivered ____¢
- [ ] RESTRICTED DELIVERY.
  Show to whom, date, and address of delivery $____

(CONSULT POSTMASTER FOR FEES)

2. ARTICLE ADDRESSED TO:
Robinson Company
4836 16th St, N.W.
Washington, D.C. 20011

3. ARTICLE DESCRIPTION:
REGISTERED NO. | CERTIFIED NO. 714202 | INSURED NO.

(Always obtain signature of addressee or agent)

I have received the article described above.
SIGNATURE [x] Addressee [ ] Authorized agent

4. DATE OF DELIVERY | POSTMARK

5. ADDRESS (Complete only if requested)

6. UNABLE TO DELIVER BECAUSE: | CLERK'S INITIALS

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

☆ GPO: 1976-272-382

3051

SENDER: Complete items 1, 2, and 3.
Add your address in the "RETURN TO" space on reverse.

1. The following service is requested (check one).
- [ ] Show to whom and date delivered ____¢
- [ ] Show to whom, date, and address of delivery ____¢
- [ ] RESTRICTED DELIVERY
  Show to whom and date delivered ____¢
- [ ] RESTRICTED DELIVERY.
  Show to whom, date, and address of delivery $____

(CONSULT POSTMASTER FOR FEES)

2. ARTICLE ADDRESSED TO:

3. ARTICLE DESCRIPTION:
REGISTERED NO. | CERTIFIED NO. | INSURED NO.

(Always obtain signature of addressee or agent)

I have received the article described above.
SIGNATURE [ ] Addressee [ ] Authorized agent

4. DATE OF DELIVERY | POSTMARK

5. ADDRESS (Complete only if requested)

6. UNABLE TO DELIVER BECAUSE: | CLERK'S INITIALS

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

☆ GPO: 1976-272-382

3051