

RECEIPT

INSTRUCTIONS TO DELIVERING EMPLOYEE

DELIVER ONLY TO ADDRESSEE (not additional)

SHOW ADDRESS WHERE DELIVERED IN ITEM #1 BELOW (if additional)

Received from the Postmaster the Registered, Certified, or Insured article, the number of which appears on the face of this return receipt.

SIGNATURE OR NAME OF ADDRESSEE

*Robert A. Wagner*

SIGNATURE OF ADDRESSEE'S AGENT (Agent should enter address as shown in item #1 above)

*Robert A. Wagner*

DELIVERY DATE

*12-29-60*

00764118

INSTRUCTIONS TO DELIVERING EMPLOYEE

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Received from the Postmaster the Registered, Certified, or Insured article, the number of which appears on the face of this return receipt.

SIGNATURE OR NAME OF ADDRESSEE

*Don A. ...*

SIGNATURE OF ADDRESSEE'S AGENT (Agent should enter address as shown in item #1 above)

*Don A. ...*

DELIVERY DATE

*DEC 28 1960*

**MON Q NTO**

#1-INSTRUCTIONS TO DELIVERING EMPLOYEE

Deliver ONLY to addressee  Show address where delivered

(Additional charges required for these services)

RETURN RECEIPT

Received the numbered article described on other side.

SIGNATURE OR NAME OF ADDRESSEE (must always be filled in)

*Monsanto Chemical Co.*

SIGNATURE OF ADDRESSEE'S AGENT, IF ANY

*J. Van Horn*

DATE DELIVERED

*DEC 28 '60*

ADDRESS WHERE DELIVERED (only if requested in item #1)

**Boettcher**

#1-INSTRUCTIONS TO DELIVERING EMPLOYEE

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RETURN RECEIPT

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SIGNATURE OR NAME OF ADDRESSEE (must always be filled in)

**BOETTCHER AND COMPANY**

SIGNATURE OF ADDRESSEE'S AGENT, IF ANY

By *Boettcher*

DATE DELIVERED

*DEC 28 1960*

ADDRESS WHERE DELIVERED (only if requested in item #1)

**BRINKER HOFF Dairy**

#1-INSTRUCTIONS TO DELIVERING EMPLOYEE

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SIGNATURE OR NAME OF ADDRESSEE (must always be filled in)

*Brinkerhoff & Co.*

SIGNATURE OF ADDRESSEE'S AGENT, IF ANY

*B. Todd*

DATE DELIVERED

*12/28/60*

ADDRESS WHERE DELIVERED (only if requested in item #1)

**DAWSON OIL**

#1-INSTRUCTIONS TO DELIVERING EMPLOYEE

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SIGNATURE OR NAME OF ADDRESSEE (must always be filled in)

*Dawson Oil Corporation*

SIGNATURE OF ADDRESSEE'S AGENT, IF ANY

*A. B. ...*

DATE DELIVERED

*DEC 28 1960*

ADDRESS WHERE DELIVERED (only if requested in item #1)

**AICORA**

#1-INSTRUCTIONS TO DELIVERING EMPLOYEE

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SIGNATURE OR NAME OF ADDRESSEE (must always be filled in)

*Aicora Corp.*

SIGNATURE OF ADDRESSEE'S AGENT, IF ANY

*E. White*

DATE DELIVERED

*DEC 28 1960*

ADDRESS WHERE DELIVERED (only if requested in item #1)

**Sheppard**

#1-INSTRUCTIONS TO DELIVERING EMPLOYEE

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SIGNATURE OR NAME OF ADDRESSEE (must always be filled in)

*David J. Sheppard*

SIGNATURE OF ADDRESSEE'S AGENT, IF ANY

*Lana Casaday*

DATE DELIVERED

*12-28-60*

ADDRESS WHERE DELIVERED (only if requested in item #1)

30-17