UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION II
EDISON, NEW JERSEY 08837

MAY 20 1993

CERTIFIED MAIL--
RETURN RECEIPT REQUESTED

See Attached List of Addressees

Re: Frontier Chemical Superfund Site
4626 Royal Avenue, Niagara Falls, Niagara County, New York

Dear Sir/Madam:

The U.S. Environmental Protection Agency ("EPA") is charged with responding to the release or threatened release of hazardous substances, pollutants and contaminants into the environment and with enforcement responsibilities under the Comprehensive Environmental Response, Compensation and Liability Act ("CERCLA"), 42 U.S.C. §§ 9601, et seq.

EPA has documented the release and threatened release of hazardous substances into the environment at a site referred to herein as the Frontier Chemical Superfund Site (the "Frontier Site" or the "Site"), a former waste processing/management facility located in Niagara Falls, Niagara County, New York. In response to these releases of hazardous substances and the threat of future such releases, EPA has spent public funds and anticipates spending additional public funds pursuant to CERCLA.

Under CERCLA and other laws, responsible parties may be held liable for monies expended by the federal government in taking response actions at and around sites where hazardous substances have been released, including investigative, planning, removal, remedial and enforcement actions. Responsible parties also may be subject to orders requiring them to take response actions themselves.

Responsible parties under CERCLA include current and past owners or operators of a facility, persons who arranged for the treatment or disposal of hazardous substances which came to be disposed at a facility, and persons who accepted hazardous substances for transport to disposal or treatment facilities or sites selected by such persons.

264458

By this letter, we notify you that we have reason to believe that your company is a potentially responsible party ("PRP") within the meaning of Section 107(a) of CERCLA, 42 U.S.C. §9607(a), with respect to the Site. The attached list of addressees of this letter represents the list of the PRPs identified by EPA with respect to the Site to date.

Thus far, the response activities that EPA has taken with respect to the Site include, among other things, establishing 24-hour Site security; maintaining boilers that supply steam to the steam tracer lines, process lines and heat to the drum storage buildings; maintaining compressors which are essential to the fire control system on-site; pumping storm waters from containment areas through the on-site carbon absorption system and into storage tanks, pending approval for discharge; performing regularly scheduled inspections to examine the structural integrity of drums and tanks; and overpacking leaking drums. In addition, EPA has segregated and inventoried all laboratory sized containers at the Site, has returned compressed gas cylinders to their manufacturers, and sent empty drums off-site to a drum recycler. We intend to take or require the PRPs to take additional response activities at the Site. Those activities include, among other things, disposal of the numerous drums, drum contents and other waste materials now present at the Site, at an EPA-approved treatment or disposal facility. We expect these response actions to be conducted under a phased approach. The tasks that we presently expect to be included in the initial phase (hereinafter, "Phase 1") are described in the enclosed draft administrative consent order under Section 106(a) of CERCLA. EPA's current estimate of the cost of the response activities outlined in the enclosed draft order is $4,705,896.31.

We expect the subsequent phase(s) of response activities at the Site to include such tasks as the removal of bulk waste materials found in tanks at the Site and a soils and groundwater investigation. We anticipate such subsequent work to be the subject of a future letter to the PRPs, and presently expect it to be addressed under a separate administrative order(s).

We wish to determine whether you are willing to perform or fund the response activities outlined in the enclosed draft consent order. Should you not volunteer to perform or fund the work, EPA will proceed with the work itself (the costs of which you may be liable for under Section 107(a) of CERCLA) or EPA may require you to perform the work pursuant to a unilateral administrative order issued under Section 106(a) of CERCLA.

Please notify EPA in writing within twenty-eight (28) calendar days of your receipt of this letter as to whether you are prepared to perform or fund the response activities described in the enclosed draft consent order. Given the large number of PRPs for the Site, we urge the recipients of this letter to form a Steering Committee which would serve as a contact between EPA and the PRPs. The recipients of this letter may either respond to

the letter individually or through a representative of the Steering Committee. If you do not provide a written response to this letter, either individually or through the Steering Committee, within 28 days of your receipt of this letter, we will assume that you decline to perform or participate in the Phase 1 response activities.

Assuming that some or all of the PRPs are willing to perform the work described in the enclosed draft consent order, any negotiations regarding the terms of the consent order will need to be completed within fifty (50) calendar days of your receipt of this letter.

In order to facilitate settlement discussions, we have prepared and enclosed herewith a draft list (hereinafter, the "Waste-In List") of the generators of the drums of waste currently at the Site. Please note that this Waste-In List only reflects the drums at the Site; it does not cover other waste materials at the Site, including the approximately 344,000 gallons of liquids in tanks at the Site.

EPA has established an administrative record file for the Site. The administrative record file is available for your review at the following locations during regular business hours:

1. United States Environmental Protection Agency
   Region II
   2890 Woodbridge Avenue, Bldg. 205
   Edison, NJ 08837
   Contact: Frank Evans or Lisa Schweizer
   (908) 906-6980

2. United States Environmental Protection Agency
   Public Information Office
   345 Third Street, Suite 530
   Niagara Falls, NY 14303
   Contact: Mike Basile (716) 285-8842

3. Niagara Falls Public Library
   1425 Main Street
   Niagara Falls, NY 14303
   (716) 286-4881

EPA also wishes to determine whether you are willing to reimburse the agency for the response costs it has incurred in connection with the Site. As of April 7, 1993, the EPA costs appearing in EPA's Integrated Financial Management System, regarding the Frontier Chemical Site, total at least $376,121.30. These costs are broken down as follows:

Emergency Response Cleanup Service (ERCS) Contractor (ETI)	$330,975.95
Technical Assistance Team (TAT) Contractor (Roy F. Weston)	208.25
EPA Payroll	17,076.28
EPA Indirect Costs	22,652.50
EPA Travel Expenses	5,208.32
TOTAL (as of 4/7/93)	$376,121.30

In accordance with Section 107(a) of CERCLA, 42 U.S.C. §9607(a), interest on the $376,121.30 will begin to accrue as of the date of this letter. The costs incurred by EPA with respect to the Site are charged to the Hazardous Substance Superfund, established pursuant to 26 U.S.C. §9507 and administered by EPA. As PRPs, you are potentially liable for EPA's costs, plus interest.

Pursuant to Section 107(a) of CERCLA, EPA hereby requests that you make restitution in the amount of $376,121.30, together with any additional response costs incurred and/or documented by EPA with respect to the Site, plus any and all interest recoverable under Section 107 or under any other provision of law. The draft Order enclosed with this letter provides for the PRPs' reimbursement of, inter alia, EPA's past costs.

Please note that EPA is incurring additional response costs with respect to the Site on an ongoing basis, and expects to continue to incur response costs at the Site in the future. In accordance with Section 107(a) of CERCLA, interest on such additional costs shall accrue from the date of expenditure.

Within twenty-eight (28) days of your receipt of this letter, please notify EPA unambiguously as to whether you wish to make such restitution to EPA. (You may provide such notification to EPA either individually or through the Steering Committee that is formed by the PRPs.) If you do not notify EPA within that period that you are prepared to make such restitution, EPA will conclude that you do not wish to reimburse EPA for its past costs, and may commence preparations for civil litigation against you.

Your response to this letter should be sent to Mr. Kevin Matheis, Emergency and Remedial Response Division, Removal Action Branch, U.S. Environmental Protection Agency, Edison Field Facility, 2890 Woodbridge Avenue, Building 209 (MS-211) Edison, New Jersey 08837, with a copy to Elena Kissel, Esq., Office of Regional Counsel, U.S. Environmental Protection Agency, Region II, 26 Federal Plaza, Room 437, New York, NY 10278.

This notice letter is not being provided pursuant to the special notice procedures outlined in Section 122(e) of CERCLA, 42 U.S.C. §9622(e). Use of those procedures here and the moratorium that those procedures entail would be inappropriate in light of the imminent and substantial endangerment posed by conditions at the Site and the need for prompt performance of the planned response activities.

Please feel free to contact Kevin Matheis or Elena Kissel by calling the Frontier Chemical information line at (716) 284-5405 on weekdays between the hours of 9:00am - 3:00pm if you have any questions concerning this matter.

Thank you for your prompt attention to this matter.

Sincerely yours,

Richard Salkie

for George Pavlou, Acting Director
Emergency and Remedial Response Division

Enclosures

cc: Michael O'Toole - NYSDEC (w/out enclosure)
Jeffrey Lacey, Esq.- NYSDEC (w/out enclosure)

THIS INFORMATION DOES NOT CONSTITUTE A NON-BINDING PRELIMINARY ALLOCATION OF RESPONSIBILITY UNDER CERCLA SECTION 122(e)(3). THIS INFORMATION SHOULD NOT BE CONSTRUED AS AN ALLOCATION OF RESPONSIBILITY OR LIABILITY BY EPA. THIS WASTE-IN LIST IS PROVIDED SOLELY FOR YOUR INFORMATION. THIS LIST IS PRELIMINARY AND SUBJECT TO REVISIONS BASED UPON NEW INFORMATION AS, AND IF, IT BECOMES AVAILABLE.

FRONTIER CHEMICAL
NIAGARA FALLS, NEW YORK

Volumetric List

GENERATOR	NO. OF DRUMS	EPA WASTE CODES	LABPACKS 5gal	10gal	20gal	30gal	55gal	TOT GAL	DRUMS 5gal	30gal	55gal	TOT GAL	TOTAL VOLUME (Lab Packs + Drums)
21ST CENTURY ENVELOPE	026	UNKNOWN									26	1430	1430
A.B. CHANCE	031	D002,7									31	1705	1705
ABB AIR PREHEATER, INC.	008	UNKNOWN									8	440	440
ABB KENT-TAYLOR	012	D008,39,40/F001									12	660	660
ABB TRACTION, INC.	025	D007									25	1375	1375
ACF SHIPPERS CARLINE	011	D001/F003,5									11	605	605
ACIMI CORP.	039	UNKNOWN									39	2145	2145
ADCHEM CORP.	006	D001/F003,5									6	330	330
ADCO PRODUCTS	002	0001,2								1	1	85	85
ADMIRAL FOLDING BOX	006	D001/F003,5									6	330	330
ADVANCE ABSORBER PRODUCTS	002	D001/U223	2					10					10
AEP INDUSTRIES #1	003	D001									3	165	165
AEROQUIP CORP.	004	D002,7									4	220	220
AGC CORP. (PS)	001	D001									1	55	55
AGWAY ENERGY	007	D002									7	385	385
AIRLINE PETROLEUM	001	D001,18									1	55	55
AIROIL PRODUCTS	001	UNKNOWN									1	55	55
ALLEGHENY CO-DEPT OF L	001	D002/U134		1				20					20
ALLENTOWN CEMENT CO.,INC.	028	UNKNOWN									28	1540	1540
ALLIANCE TOOL DIVISION	002	D001/F003									2	110	110
ALLIED SINTERINGS	001								1			5	5
ALPINE PRESS	004	D001,7,8/F003,5									4	220	220
AMERICAN AIRLINES	002	D001/F002									2	110	110
AMRESCO	001	D002									1	55	55
ANHUESER BUSCH	001	D002									1	55	55
ANITEC INTL PAPER IMMG	031	UNKNOWN									31	1705	1705
APOLLO METALS INC.	002	F003/D001									2	110	110
APS INC.	007	D002							1		6	335	335
ARIES AUTOMOTIVE OF SOMERS	004	D001									4	220	220
ARMSTRONG WORLD INDUSTRIES	010	UNKNOWN									10	550	550
ARVIN CALSPAN CORP.	001	F003/D001									1	55	55
ATHEMIA WIRE	004	D002									4	220	220

FRONTIER CHEMICAL
NIAGARA FALLS, NEW YORK

Volumetric List

GENERATOR	NO. OF DRUMS	EPA WASTE CODES	LABPACKS 5gal	10gal	20gal	30gal	55gal	TOT GAL	DRUMS 5gal	30gal	55gal	TOT GAL	TOTAL VOLUME (Lab Packs + Drums)
ATLANTIC FABRICATORS	002	D001									2	110	110
ATLANTIC MARKETING TER	001	D001,18									1	55	55
ATLANTIC REFINING (A)	002	D001,18									2	110	110
ATLANTIC REFINING (B)	001	D001,18									1	55	55
ATLANTIC REFINING (C)	001	D001,18									1	55	55
ATLANTIC REFINING (D)	001	D001,18									1	55	55
ATLANTIC REFINING (E)	001	D001,18									1	55	55
ATLANTIC SINTERED METALS	001	D002,3									1	55	55
ATLAS TUBE	001	UNKNOWN									1	55	55
ATTICA CORRECTIONAL FCLTY	005	D001/F003									5	275	275
B & B GREENBERG CO.	009	D002									9	495	495
BAILEY MANUFACTURING	005	UNKNOWN									5	275	275
BALLETMAKERS,INC.	005	F003,5/D001,35									5	275	275
BARRE ENGRAVING CO.	004	UNKNOWN									4	220	220
BARRNET LITHO,INC.	004	UNKNOWN									4	220	220
BATTERY ENGINEERING,INC.	002	D002							1		1	55	60
BELOIT MANHATTAN	003	UNKNOWN					2	110			1	55	165
BLIEM STEEL	001	UNKNOWN									1	55	55
BLUE CHIP PRODUCTS,INC.	004	D001/F003									4	220	220
BLUE GRASS CHEMICAL SP	038	D002,6,7,8									38	2090	2090
BOSTON COACH	003	UNKNOWN									3	165	165
BRIDON AMERICA CORP.	013	UNKNOWN									13	715	715
BRIGHT STAR INDUSTRY	006	D001									6	330	330
BROAD COVE TRUST	001	D001,8									1	55	55
BRUNSWICK TIMES RECORD	007	D005,6,7									7	385	385
BUCKEYE PIPELINE	006	D001,18									6	330	330
BUCKHAM TRANSPORT LTD	004	UNKNOWN									4	220	220
BUCKNER OIL SERVICE INC	004	UNKNOWN									4	220	220
BUFFALO COLOR CORP.	010	D001/U012									10	550	550
BUFFALO FREE TRADE COMPLEX	006	D001									6	330	330
BURROUGH HALL	002	UNKNOWN									2	110	110
BUS INDUSTRIES OF AMERICA	012	D001,3/F001,3									12	660	660

FRONTIER CHEMICAL
NIAGARA FALLS, NEW YORK

Drum Volume List

GENERATOR	NO. OF DRUMS	EPA WASTE CODES	LABPACKS 5gal	LABPACKS 10gal	LABPACKS 20gal	LABPACKS 30gal	LABPACKS 55gal	LABPACKS TOT GAL	DRUMS 5gal	DRUMS 30gal	DRUMS 55gal	DRUMS TOT GAL	TOTAL VOLUME (Lab Packs + Drums)
C.R.BARD CATHETER & INSTRUMENT	071	D001,35/F003,5								2	69	3855	3855
CARBO THERM	002	F003									2	110	110
CASE HOYT CORPORATION	025	D001,39,40/F005									25	1375	1375
CCL CUSTOM MANUFACTURING	015	D001									15	825	825
CENTRAL INDUSTRIAL LABS (PS)	001	D006/F007									1	55	55
CHALLENGE MFG	001	UNKNOWN									1	55	55
CHAMPION PRODUCTS	039	D001/F002,3,5								1	38	2120	2120
CHARM GRAPHICS INC.	002	D001/F003									2	110	110
CHEMCLENE CORPORATION	028	D001,18/F001,3									28	1540	1540
CHEMICAL LEAMAN TANK LINE	002	012,052									2	110	110
CHEMICAL PROCESS & SPLY	005	D002									5	275	275
CHESTER HOIST	003	D001									3	165	165
CHILDSSTORE FIXTURE CO.	011	F003,5									11	605	605
CHROMATIC PAINT	001	UNKNOWN									1	55	55
CHROMIUM CORPORATION	096	D002,7									96	5280	5280
CITY OF SYRACUSE-DPW	001	D001									1	55	55
CITY PUMP & TANK	003	D001,18									3	165	165
CLARK GRAVE VAULT	004	D002,7									4	220	220
CODO MFG.	001	UNKNOWN									1	55	55
COMFORT DESIGN, INC.	008	F003,5/D001									8	440	440
COMMANDER MOTBY	048	UNKNOWN									48	2640	2640
COMMUNITY MEDICAL CENTER	001	D001	1					5					5
CONRAIL	001	D008,18									1	55	55
CONSTRUCTION SPECIALTIES	005	F001,5									5	275	275
CORELL STEEL	052	D001/F001,2,3,5									52	2860	2860
CORSON MFG. CO.,INC	005	D001/F002									5	275	275
CREATIVE PRINTING	002	D001,39,40									2	110	110
CREST FOAM	054	D001,2,3/U019,194,223							44		10	770	770
CRETERVAULT CORP.	001	UNKNOWN									1	55	55
CROWN METRO	001	D002									1	55	55
CSMS NATIONAL GUARD	001	D002,8									1	55	55
CUSTOM DESIGN SERVICES	012	D002,7									12	660	660

FRONTIER CHEMICAL
NIAGARA FALLS, NEW YORK

Drum Volume List

GENERATOR	NO. OF DRUMS	EPA WASTE CODES	LABPACKS 5gal	10gal	20gal	30gal	55gal	TOT GAL	DRUMS 5gal	30gal	55gal	TOT GAL	TOTAL VOLUME (Lab Packs + Drums)
CYCLE CHEM, INC.	009	F003,5									9	495	495
CYCLOTHERM	002	D011									2	110	110
D.C. AUTOMOTIVE	003	UNKNOWN									3	165	165
DANA CORPORATION	003	UNKNOWN									3	165	165
DARNORTH COMPANY	007	D001									7	385	385
DE STEFANO	003	F003/D001									3	165	165
DEGRAFF MEMORIAL HOSPITAL	001	D001									1	55	55
DELEVAN INDUSTRIES	001	UNKNOWN									1	55	55
DELMONTE CORPORATION	006	F005/D001/U220							2		4	230	230
DELTA RUBBER CO.	013	U012							13			65	65
DELVECCHIO TRANSPORT	002	D001	2					10					10
DENNISON OIL CO.	001	UNKNOWN									1	55	55
DIAMOND EAST LABORATORY	019	D001									19	1045	1045
DONLEE TECHNOLOGY INC	001	F001/D002,7									1	55	55
DONSCO, INC.	001	D001,35									1	55	55
DRESSER MFG. DIVISION	026	D001									26	1430	1430
DUNCAN GALVANIZING CORP	002	D002,6,7,8									2	110	110
DUNKIRK RADIATOR CORP.	002	D001									2	110	110
DURIRON CO. INC	004	F005/D001									4	220	220
DYNAMIC HYDROBLASTING	008	D002									8	440	440
EASTERN COLOR & CHEMICAL	001	UNKNOWN									1	55	55
EASTERN CONSOLIDATED AND DIST.	001	D018									1	55	55
EASTERN ELEC APPARATUS	003	UNKNOWN									3	165	165
EASTERN INDUSTRIES	005	UNKNOWN									5	275	275
EATON CORP.	014	D002									14	770	770
EGGERS INDUSTRIES	003	F003,5/D001									3	165	165
EICHEL BERGERS	001	F002,5/D018									1	55	55
ELCO CORPORATION	011	D001,2,6,8/F001									11	605	605
ELECTRIC MATERIALS CO.	003	D002,8									3	165	165
EM CORP.	005	D001,8/F005									5	275	275
ENERGY N. NATURAL GAS	001	D001	1					5					5
ENVIRONMENTAL DEPOT (PS)	002	UNKNOWN									2	110	110

FRONTIER CHEMICAL
NIAGARA FALLS, NEW YORK

Volumetric List

GENERATOR	NO. OF DRUMS	EPA WASTE CODES	LABPACKS 5gal	10gal	20gal	30gal	55gal	TOT GAL	DRUMS 5gal	30gal	55gal	TOT GAL	TOTAL VOLUME (Lab Packs + Drums)
ENVIRONMENTAL WASTE MGMT	030	D001-5,7-9,11/U122,154,188,219	16			11	3	575					575
EPICURE PRODUCTS,INC.	005	UNKNOWN									5	275	275
ERIE COUNTY WATER AUTH.	001	UNKNOWN									1	55	55
ERIE INSURANCE GROUP	004	D002					3	165			1	55	220
ERIE PLASTICS	001	D002									1	55	55
ETI TANK CLEANING SERV	001	F003,5									1	55	55
EUREKA SECURITY PRINTING	023	UNKNOWN									23	1265	1265
FAMILY MUTUAL BANK	001	D001,18									1	55	55
FANCHER FURNITURE	003	F003,5/D001,3,5									3	165	165
FERRO CORPORATION (VESUVIUS)	002	D002									2	110	110
FIRE DOOR CORP.	002	F003,5							1		1	60	60
FISHER INDUSTRIAL SVCE INC.	012	D002,6,7									12	660	660
FISHER PRICE TOYS	015	D001									15	825	825
FLACH INDUSTRIES	004	D001/F003									4	220	220
FLINT INK	050	D001									50	2750	2750
FOAMEX PRODUCTS,INC.	001	F002									1	55	55
FORMS,INC.	008	D001									8	440	440
FOSECO,INC.	006	D001,7									6	330	330
FRAMINGHAM WELDING	001	F003,5									1	55	55
FRANK ELECTRIC CORP.	002	F003,5									2	110	110
FRICK CO.	001	F003/D001									1	55	55
FRUEHAUF CORP.	005	D001,11									5	275	275
FUJITECH	001	UNKNOWN									1	55	55
FULLER CO.	004	D001,35							1		3	170	170
G.W. LISK CO., INC.	001	F008/D003,6									1	55	55
GARDENWAY MFG	002	D002									2	110	110
GEIGER INTERNATIONAL	008	D001									8	440	440
GEM CHEM,INC.	063	UNKNOWN									63	3465	3465
GENERAL CHEMICAL CORP.	015	D006,7,8,39,40/F001,2									15	825	825
GENERAL SERVICES ADMIN	001	D002									1	55	55
GENESEE HOSPITAL	021	D001,9/F003/P105/U021,34,135	2	4	1	1	1	155			12	660	815
GENTEX CORPORATION	002	D022									2	110	110

FRONTIER CHEMICAL
NIAGARA FALLS, NEW YORK

Volumetric List

GENERATOR	NO. OF DRUMS	EPA WASTE CODES	LABPACKS 5gal	10gal	20gal	30gal	55gal	TOT GAL	DRUMS 5gal	30gal	55gal	TOT GAL	TOTAL VOLUME (Lab Packs + Drums)
GEOCHEM (PS)	001	D001				1		30					30
GEORGE INDUSTRIES	002	UNKNOWN									2	110	110
GICHNER MOBILE SYSTEMS	011	D001,2,8									11	605	605
GIDDINGS & LEWIS	027	D002,5,10,30,32,33/F003							20-gal,	1	25	1425	1425
GILBERT & BENNETT	001	D002									1	55	55
GILBERT/COMMONWEALTH,INC.	012	UNKNOWN									12	660	660
GLEDHILL RD MACHINE CO.	004	F005/D001									4	220	220
GOLD MEDAL LADDER	015	UNKNOWN									15	825	825
GOOD SAMARITAN HOSPITAL	001	D009/U151	1					5					5
GORDON PUBLICATIONS,INC.	020	F002,3,5									20	1100	1100
GOURO NELSON	001	UNKNOWN									1	55	55
GRAND HAVEN FURNITURE	007	D001									7	385	385
GSI-ALLIED SINTERINGS	001	D001									1	55	55
GTE SYLVANIA	001	D002					1	55					55
H.B. IVES	012	F003,5/D001,3,5,8									12	660	660
HANDY & HARMAN TUBE CO.	010	F001,3,5									10	550	550
HASKELL OF PITTSBURGH	001	F003/D001									1	55	55
HAYDEN ENVIRONMENTAL	029	D001,2,7,9,11/F003,5									29	1595	1595
HEDSTROM CORPORATION	106	D001,7/F003									106	5830	5830
HENRY L. HINCKLEY CO.	001	D001/F003									1	55	55
HESS & CLARK, INC.	001	UNKNOWN									1	55	55
HOLBEN GRAPHICS	030	D001,5,11,39,40/U228									30	1650	1650
HONEY COMB SYSTEMS,INC	001	F003,5	1					5					5
HOWARDS EXPRESS	001	D001,18									1	55	55
HUB FOLDING BOX CO.,INC	018	D001									18	990	990
HUNTINGDON ANALYTICAL SVC	002	F002,3/D001									2	110	110
HUTCHINSON HOUSEHOLD (PS)	001	U036									1	55	55
HYDROSAMPLE DIVISION (PS)	001	D001,4,5,6,7									1	55	55
ICI AMERICAS	029	D002									29	1595	1595
II,VI,INC.	007	D002,10									7	385	385
IMAGING & SENSING TECHNOLOGY	004	D001,2,5,7/F003									4	220	220
IMO INDUSTRIES	001	D007									1	55	55

FRONTIER CHEMICAL
NIAGARA FALLS, NEW YORK

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GENERATOR	NO. OF DRUMS	EPA WASTE CODES	LABPACKS 5gal	10gal	20gal	30gal	55gal	TOT GAL	DRUMS 5gal	30gal	55gal	TOT GAL	TOTAL VOLUME (Lab Packs + Drums)
INDEPENDANT CABLE CO.	006	UNKNOWN									6	330	330
INDUSTRIAL COATING	003	D007									3	165	165
INDUSTRIAL VACUUM SERV.	001	D001									1	55	55
INGERSOL-RAND CO.	001	D002									1	55	55
INTERGRAPHICS TECH,INC	003	D001									3	165	165
INTERMARK FLOCK CORP (A) (PS)	002	UNKNOWN									2	110	110
INTERMARK FLOCK CORP (B) (PS)	001	UNKNOWN									1	55	55
INTERNATIONAL PAPER CO	004	UNKNOWN									4	220	220
INX INTERNATIONAL/MIDLAND COLOR	042	D001									42	2310	2310
IT HIGBIE	004	D001									4	220	220
J & D AUTOMOTIVE	003	D001,18									3	165	165
J.B. SLEVIN CO.INC.	006	D001									6	330	330
JAMESTOWN ELECTROPLATING WORKS	004	D002,3,6,8/F006,8									4	220	220
JESSUP DOOR CO.	003	D001									3	165	165
JOHN H. WILBANKS	009	UNKNOWN									9	495	495
K-MART #7171	015	UNKNOWN									15	825	825
KCR TECHNOLOGY	004	D001			1		3	185					185
KEENEY MANUFACTURING CO.	002	D006,7,8									2	110	110
KEM PLAYING CARDS	011	D001									11	605	605
KENMORE TON.UNION FRE	002	D008,39									2	110	110
KENSINGTON INDUSTRIES	001	D002									1	55	55
KEYES FIBRE CO.	019	D002,3,4,5,7,8,9,11/U222/P012	13					65		6		180	245
KEYSTONE CARBON CO.	001	D002									1	55	55
KIVORT STEEL INC	005	D002/F002									5	275	275
KNOX SEMICONDUCTOR	001	D002									1	55	55
KOA SPEER ELECTRONICS, INC	002	F002									2	110	110
KWIK FILL	002	D001,18									2	110	110
LADESCO, INC.	001	F003,5									1	55	55
LANKENAU HOSPITAL	006	D001,2/U003	1		2			65			3	165	230
LANNETT CO.,INC.	001	D008			1			20					20
LAPP INSULATORS	046	D001,3,8,11,39,40/F002,3									46	2530	2530

FRONTIER CHEMICAL
NIAGARA FALLS, NEW YORK

Volumetric List

GENERATOR	NO. OF DRUMS	EPA WASTE CODES	LABPACKS 5gal	10gal	20gal	30gal	55gal	TOT GAL	DRUMS 5gal	30gal	55gal	TOT GAL	TOTAL VOLUME (Lab Packs + Drums)
LAVALLEY BUILDING SUPPLY	001	D002									1	55	55
LAWRENCEVILLE FIRST AI	001	D001,18									1	55	55
LEDGEMERE LAND CORP. (PS)	001	U036									1	55	55
LEJEUNE STEEL CO.	011	D001/F005									11	605	605
LELAND ELECTRO SYSTEMS	001	D001									1	55	55
LEVITON MANUFACTURING	001	UNKNOWN									1	55	55
LEWIS CORP.	004	D001/F003,5									4	220	220
LEYBOLD	003	D002							2		1	65	65
LG INDUSTRIES	002	F003,5									2	110	110
LIBRALTER PLASTICS	001	D001									1	55	55
LLOYD MFG. CO.	002	UNKNOWN									2	110	110
LOEWENGART & CO., INC.	004	D001,2,7,8/F003,5									4	220	220
LOOST COMPANY, INC.	001	UNKNOWN									1	110	110
LORAL DEFENSE SYSTEMS	034	D001,2,3,6,7,36/F007,8/U239	3	1	2	9	590				19	1045	1635
LUCERNE PRODUCTS	001	UNKNOWN									1	55	55
LUKENITE PRODUCTS CORP.	006	UNKNOWN									6	330	330
LYN CONTRACTING CO.	001	D002/F003,5									1	55	55
LYONS TRANSPORTATION	001	F003,5									1	55	55
MAINE YANKEE ATOMIC POWER	003	D001,2,7,9	1				5		1		1	60	60
MARCOR OF NEW YORK	003	UNKNOWN									3	165	165
MARKEL CORPORATION	009	UNKNOWN									9	495	495
MARSEL MIRROR & GLASS PR	001	D002,7									1	55	55
MARTEC PLASTICS	025	D001/F003,5									25	1375	1375
MARY BENSON	016	D001,6,8,10,33,40,18/U056,226	4	1	2		70		1		8	445	515
MASLAND INDUSTRIES	002	D001,2,3	1				5				1	55	60
MASS. TANK DISPOSAL	010	UNKNOWN									10	550	550
MASTERS CORP.	003	F003,5									3	165	165
MATTATUCK MFG (TELEFLEX)	002	D002									2	110	110
MAXPACK	002	UNKNOWN									2	110	110
MCCANN MFG.	004	F002									4	220	220
MCKAY PRESS,INC.	010	UNKNOWN									10	550	550
MEAD CORP.	006	D002,7/F003,5									6	330	330

FRONTIER CHEMICAL
NIAGARA FALLS, NEW YORK

Volumetric List

GENERATOR	NO. OF DRUMS	EPA WASTE CODES	LABPACKS 5gal	10gal	20gal	30gal	55gal	TOT GAL	DRUMS 5gal	30gal	55gal	TOT GAL	TOTAL VOLUME (Lab Packs + Drums)
MED. DISPOSAL SVC (NAT. MED. WASTE)	007	D002/U188	1			4	1	180			1	55	235
MENTHOLATUM COMPANY	007	U188									7	385	385
MEMORIAL HOSPITAL	002	39326	2					10					10
MERCHANTS BANK	001	UNKNOWN									1	55	55
MERCURY AIRCRAFT INC.	003	F003,5									3	165	165
MERCY HOSPITAL	010	D001,2,3,9/P116/U162	2				2	120			6	330	450
MERIDIAN PRODUCTS	007	F003,5/D001,35									7	385	385
METAL FINISHING TECH.	002	D002,6,7,8									2	110	110
METALADE, INC.	003	D002,7/F002									3	165	165
METROLAND PRINTING	042	UNKNOWN									42	2310	2310
MICHIGAN LIMESTONE	012	UNKNOWN									12	660	660
MICHIGAN MAPLE BLOCK CO.	003	UNKNOWN									3	165	165
MICROSS DIV OF PIERCE CO.	005	F003/D001									5	275	275
MILCO INDUSTRIES	001	UNKNOWN									1	55	55
MISSISSIPPI CHEMICAL EXPRESS	001	U165									1	55	55
MOBIL OIL CORP.	001	D001,18									1	55	55
MONARCH CORTLAND	016	D001									16	880	880
MONET	035	F007/D003									35	1925	1925
MONTGOMERY WIRE CO.	001	D001,5,11	1					5					5
MONTROSE AREA HIGH SCH	028	D001,2,4,6,8,9,22/P010/U151,223	20			4		220			4	220	440
MOOG CONTROLS	020	UNKNOWN									20	1100	1100
MORGAN GUARANTEE TRUST	006	UNKNOWN				6		180					180
MORGAN MATROC	002	UNKNOWN									2	110	110
MORRILL PRESS	009	F003,5/D001									9	495	495
MURRAY RECON,INC.	006	F005/D001									6	330	330
NAS WILLOW GROVE	015	D001,18,35								2	13	775	775
NATIONAL FUEL GAS CORP.	014	D001,18									14	770	770
NATIONAL METAL FINISHING CO.	008	D002									8	440	440
NATIONAL SEA PRODUCTS	002	UNKNOWN	1					5	1			5	10
NATIONWIDE CIRCUITS	004	D002									4	220	220
NATURE'S BOUNTY INC.	003	UNKNOWN									3	165	165

FRONTIER CHEMICAL
NIAGARA FALLS, NEW YORK

Drum Volume List

GENERATOR	NO. OF DRUMS	EPA WASTE CODES	LABPACKS 5gal	10gal	20gal	30gal	55gal	TOT GAL	DRUMS 5gal	30gal	55gal	TOT GAL	TOTAL VOLUME (Lab Packs + Drums)
NAUGATUCK GLASS CO.	003	D001,39,40/F003									3	165	165
NELSON ESPENSCHIED (PS)	003	D004,D008,D009,U060,U061,U129									3	165	165
NIAGARA TRANSFORMER CORP.	002	F003/D001									2	110	110
NINE MILE POINT STATION 2	003	D001							3				15
NORTH SHORE LABS INC.	001	F005/D001									1	55	55
NORTHEAST GRAPHICS,INC.	002	F003,5									2	110	110
NORTHLAND REFRIGERATION	001	D002/F001									1	55	55
NY DEPT.OF TRANSPORT	002	D001,18									2	110	110
NY SUSQUEHANNA & WESTE	003	D001,18									3	165	165
O'LEARY PAINT CO.	003	UNKNOWN									3	165	165
OATEY CO.	009	F003,5/D001									9	495	495
OCKER & TRAP	010	D001,6,8,10,18									10	550	550
ODELL CO.	001	F003,5									1	55	55
OFCO INC.	001	D002/F001									1	55	55
OLEAN ADVANCED PRODUCT	006	D001									6	330	330
ONYA INC.-MARBLE SHOP (PS)	001	D002									1	55	55
ONTARIO ENGINEERED SUSPENSION	006	UNKNOWN									6	330	330
OWENS ILLINOIS NE6-TV	008	D001,2,5,7,8/P010,11/U080,134			3		3	2...260					260
OXFORD INNOVATIONS	006	UNKNOWN									6	330	330
P & WC AIRCRAFT SERVICES	001	UNKNOWN									1	55	55
P.A.T. PRODUCTS	001	UNKNOWN									1	55	55
PALMYRA BOAT YARD	019	D001,18									19	1045	1045
PANNIER CORPORATION	001	D002									1	55	55
PAPER CONVERSION INC.	018	D005									18	990	990
PASSAIC ENGRAVING CO., INC.	009	D002,7									9	495	495
PAUL B. ZIMMERMAN	024	UNKNOWN									24	1320	1320
PEASE A.F.B.	001	D002									1	55	55
PEERLESS WINSMITH, INC.	011	D001,3/F011									11	605	605
PENN TANK	078	UNKNOWN									78	4290	4290
PERRIOGRAPHICS	003	D001									3	165	165
PETROLEUM FUEL & TERMI	002	UNKNOWN									2	110	110
PHIL'S SERVICE STATION	002	D001									2	110	110

FRONTIER CHEMICAL
NIAGARA FALLS, NEW YORK

Volumetric List

GENERATOR	NO. OF DRUMS	EPA WASTE CODES	LABPACKS 5gal	10gal	20gal	30gal	55gal	TOT GAL	DRUMS 5gal	30gal	55gal	TOT GAL	TOTAL VOLUME (Lab Packs + Drums)
PHILADELPHIA RESINS	001	F003/D001									1	55	55
PIONEER PLASTICS	001	U147/D003							1			5	5
PLAINVILLE ELECTROPLATING CO.	001	D002,7									1	55	55
PLASTIGLIDE MFG. CORP.	009	D001,2/F001,3									9	495	495
PLATING FOR ELECTRONICS INC.	002	F009/D002,11									2	110	110
PLY GEMS	013	D002									13	715	715
POLLUTION SOLUTIONS	026	D002,4,5-11,13/F001,2,7/U036,122									26	1430	1430
POLYMERICS,INC.	014	U244									14	770	770
POLYMYX	002	D001									2	110	110
POLYPLATING, INC.	002	UNKNOWN									2	110	110
POTTSTOWN HOSPITAL	001	D009	1					5					5
POWEREX, INC.	010	D001,6,18/F001,3									10	550	550
PRATT & WHITNEY	021	D001,2,11/F001,2									21	1155	1155
PRESTOLITE OF NY, INC.	013	D001,2,7,8,40/F002,3,5									13	715	715
PRINT WORKS	001	D002									1	55	55
PRINTCO	008	D001									8	440	440
PROTECTIVE CLOSURES CO., INC.	007	D001/F003									7	385	385
PUROLATOR PRODUCTS	026	D001,5,6									26	1430	1430
QUIN-T CORP.	004	F003,5									4	220	220
R & A LEATHER FINISH CO.	008	F003,5									8	440	440
R.E. CHAPIN MANUFACTURING	001	UNKNOWN									1	55	55
RALSTON PURINA	004	D002								3	1	145	145
RAMAPO-CATSKILL LIBRARY SYSTEM	001	D001									1	55	55
READING REHAB. HOSPITAL	002	D002									2	110	110
REALTY ENGINEERING CO.	001	D002									1	55	55
RELIABLE METAL FINISHING	008	D002,7,8									8	440	440
REMLEY & COMPANY	013	D001,11									13	715	715
RENNS SERVICE STATION	001	D001,8,18									1	55	55
RENOLD INC.	003	D001									3	165	165
RETAIL PRINTING CORP.	005	UNKNOWN									5	275	275
RIVERDALE COLOR	008	UNKNOWN									8	440	440
ROBERT BOND BUILDERS	002	D001									2	110	110

FRONTIER CHEMICAL
NIAGARA FALLS, NEW YORK

Volumetric List

GENERATOR	NO. OF DRUMS	EPA WASTE CODES	LABPACKS 5gal	10gal	20gal	30gal	55gal	TOT GAL	DRUMS 5gal	30gal	55gal	TOT GAL	TOTAL VOLUME (Lab Packs + Drums)
ROBERTS MEAT PACKING CORP.	006	D001,2,8,18								3	3	255	255
ROBOTRON	002	D001/F002,3									2	110	110
RSA SPECIALTY CHEMICAL	003	F003,5/D001									3	165	165
RTI	004	F007/D003									4	220	220
RYDER TRUCK RENTAL	008	UNKNOWN									8	440	440
S.E.MORRIS COUNTY MUNI	021	F001,2									21	1155	1155
SAEGERTOWN MFG. CORP.	001	UNKNOWN									1	55	55
SCANSFORMS, INC.	037	UNKNOWN									37	2035	2035
SCHWEIZER AIRCRAFT CORP	011	D001,2,6-9,18,23,27,32/F001,5									11	605	605
SCRANTON SEWER AUTHORITY	001	D007,9									1	55	55
SEBAGO, INC.	002	D001									2	110	110
SELECT-TRON INDUSTRIES	003	D001,2									3	165	165
SERONO BAKER DIAGNOSTIC	003	F027/D037	3					15					15
SHEPARD NILES	007	D001,18									7	385	385
SID HARVEY'S	001	F003/D001									1	55	55
SIER BATH DECK GEAR	003	F007/D003									3	165	165
SIHI PUMP	007	UNKNOWN									7	385	385
SIMMONDS PRECISION ENGINE SYS	024	D001,2,7,8/F002	1				20	1105			3	165	1270
SIMON LTI	009	D007									9	495	495
SONOCO	002	UNKNOWN									2	110	110
SONOCO FIBRE DRUM	003	UNKNOWN									3	165	165
SPECIALIZED PLATING	008	UNKNOWN									8	440	440
ST.JOHNSBURY TRUCKING	006	D001,2,8				1		55			5	275	330
STATURE MACHINE TECHNOLOGY	011	UNKNOWN								10	1	355	355
STEVENS ANALYTICAL LABS	005	D002/F001,2,3								4	1	175	175
STOCKBRIDGE AUTO BODY	005	F005/D001									5	275	275
STONER,INC.	007	D001,35/F003,5									7	385	385
STRUKTOL CO. OF AMERICA	004	UNKNOWN							one 20-gallon,		3	185	185
SUGARBUSH GOLF COURSE (PS)	001	U036									1	55	55
SUN REFINING AND MARKETING (A)	002	D001,18									2	110	110
SUN REFINING AND MARKETING (B)	001	UNKNOWN									1	55	55
SUN REFINING AND MARKETING (C)	001	UNKNOWN									1	55	55

FRONTIER CHEMICAL
NIAGARA FALLS, NEW YORK

Volumetric List

GENERATOR	NO. OF DRUMS	EPA WASTE CODES	LABPACKS 5gal	10gal	20gal	30gal	55gal	TOT GAL	DRUMS 5gal	30gal	55gal	TOT GAL	TOTAL VOLUME (Lab Packs + Drums)
SURFINCO INC.	003	F003,5/D001									3	165	165
SWANSON PLATING	006	D002,7									6	330	330
TARKETT,INC.	055	D001,2,39/F001,2,3									55	3025	3025
TECH SYSTEMS	005	D001									5	275	275
TECHNICAL COATINGS	003	U220,159/D039									3	165	165
TEKNOR APEX	020	UNKNOWN							1		19	1050	1050
TELEDYNE MCKAY	014	D001,2/F003									14	770	770
THE DINGLEY PRESS	013	F003									13	715	715
THE ELECTRIC MATERIALS CO.	001	UNKNOWN	1					5					5
THE GLOBE NEWSPAPER CO.	006	UNKNOWN									6	330	330
THE HENRY HINCKLEY CO.	002	F003,5/D001,35									2	110	110
THE PLASTEK GROUP	022	D001/F003									22	1210	1210
THERMATRU CORP.	039	UNKNOWN									39	2145	2145
THREE DIMENSIONAL CORP.	005	D001,2,22									5	275	275
TIBBETS INDUSTRY	001	UNKNOWN									1	55	55
TIGHE BOND CORPORATION (PS)	001	D002									1	55	55
TIVOLY,U.S.A.	011	D005									11	605	605
TNT & ASSOCIATES	008	D001									8	440	440
TODCO CORP	003	D001/F005									3	165	165
TOWN OF N.TONAWANDA	001	D008,18,29									1	55	55
TRANS TECH ELECTRONICS	001	F001									1	55	55
TRENCH COMPANY,INC.	016	D001,7,8/F003,5									16	880	880
TRI CAN SYSTEMS	001	F003/D001									1	55	55
TRICO PRODUCTS	006	UNKNOWN									6	330	330
TRIFARI KRUSSMAN EISCHEL, INC	001	F007/D003									1	55	55
TRUCK-LITE CO.,INC.	016	F003,5/D001									16	880	880
TURSACK PRINTING	006	UNKNOWN									6	330	330
UNIFIRST	001	D039									1	55	55
UNITED LITHOGRAPH	001	UNKNOWN									1	55	55
UNITED PANEL, INC.	002	F001,22									2	110	110
UNITED REFINING CO,PA (KWIKFILL)	002	D001,18									2	110	110

FRONTIER CHEMICAL
NIAGARA FALLS, NEW YORK

Volumetric List

GENERATOR	NO. OF DRUMS	EPA WASTE CODES	LABPACKS 5gal	10gal	20gal	30gal	55gal	TOT GAL	DRUMS 5gal	30gal	55gal	TOT GAL	TOTAL VOLUME (Lab Packs + Drums)
UNIVERSAL PRECISION	008	D001									8	440	440
US DEPT. OF ENERGY	050	D001,2,5,7,8,18/F001-5/U002,56	7			10	7	720			26	1430	2150
US GENERAL SERVICES ADMIN (PS)	001	UNKNOWN									1	55	55
US TSUBAKI,INC.	001	UNKNOWN									1	55	55
VAC AERO, INC	009	F009/D002,3									9	495	495
VENDORS FIRST CHOICE	001	F003,5									1	55	55
VERNE CORPORATION	002	D001									2	110	110
VIBROPLATING	013	F006									13	715	715
VILLAGE OF WESTFIELD	001	D001									1	55	55
VINCENZA GOLD OF AMERICA (PS)	001	D002,3									1	55	55
WALLENPACK N. ELEM SCHOOL	004	D002,3/P098				2		60			2	110	170
WATERVLIET ARSENAL	010	D001,2,7/F003,5/U159,239									10	550	550
WCA HOSPITAL	001	D001,18									1	55	55
WEBASTO SUNROOF, INC.	009	F003/D001									9	495	495
WESTBORO FIELD HDQTRS (PS)	001	U122									1	55	55
WESTERN MAINE GRAPHICS	002	UNKNOWN									2	110	110
WESTINGHOUSE ELECTRIC CORP	072	D001,2,8,35/F001,3	2					10			70	3850	3860
WEYERHAUSER CO.	002	UNKNOWN									2	110	110
WHITEHALL LUMBER CO	006	UNKNOWN									6	330	330
WILKESBARRE CITIZENS	002	D002									2	110	110
WILSON GREATBATCH LTD	001	D002									1	55	55
WILSON INSTRUMENTS	011	D002,7									11	605	605
WOLF PRINTING	002	UNKNOWN									2	110	110
XERXES CORPORATION	005	D001									5	275	275
YORK RAKES	001	F003/D001									1	55	55
UNKNOWN (DS-9)	003	39838 DR# 40,43,44					3	165					165
UNKNOWN (DS-9)	004	39839 DR# 41,42,45,46					4	220					220
UNKNOWN (DS-9)	003	39326 DR# 10,8,18	3					15					15

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

A.B. CHANCE
210 N. ALLEN STREET
CENTRALIA MO 65240

4. Article Number

P278592098

of Service:

gistered ☐ Insured
rtified ☐ COD
press Mail ☐ Return Receipt for Merchandise

ys obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X [signature]

6. Signature — Agent

X [signature]

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ABB AIR PREHEATER, INC.
PO BOX 392
WELLSVILLE NY 14895

4. Article Number
P 278 592 099

Type of Service:
- ☐ Registered
- ☐ Certified
- ☐ Express Mail
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X Lyle Easton

6. Signature — Agent
X

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

ELMIRA N.Y. 149 05/24/93 17:20

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ABB KENT-TAYLOR
PO BOX 20550
ROCHESTER NY 14603 X

4. Article Number
P278592100

Service:
ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

tain signature of addressee
and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S. MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ABB TRACTION, INC
EAST 18TH ST
ELMIRA HEIGHTS NY 14903

4. Article Number

P278592101

Type of Service:

- ☐ Registered
- ☐ Certified
- ☐ Express Mail
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X J. Yadel

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

MIRA N.Y. 149 05-05-93 20:19

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ACF SHIPPERS CARLINE
YOCUM ROAD
MILTON PA 17847

4. Article Number

P 278 592 903

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Matthew P. [illegible]

7. Date of Delivery

5/25/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ACIMI CORP
7-33 AMSTERDAM ST
NEWARK NJ 07105

4. Article Number

P278592903

1 10

Service:

d ☐ Insured
☐ COD
Mail ☐ Return Receipt for Merchandise

n signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X [signature]

6. Signature — Agent

X

7. Date of Delivery

5-25-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

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- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ADCHEM CORP.
625 MAIN STREET
WESTBURY NY 11590

4. Article Number

P278592104 1912

...ervice:

...red ☐ Insured
...d ☐ COD
... Mail ☐ Return Receipt for Merchandise

...ain signature of addressee
...agent and DATE DELIVERED.

5. Signature — Addressee

X JoAnn Slade

6. Signature — Agent

X

7. Date of Delivery 5/24

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ADCO PRODUCTS
4401 PAGE AVENUE
MICHIGAN CENTER MI 48254

4. Article Number

P278592905 1 13

Service:

ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

tain signature of addressee
and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Janice Root

7. Date of Delivery

5-24-89

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

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1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ADMIRAL FOLDING BOX
102 PLEASANT VALLEY
METHVEN MA 01844

4. Article Number

P278591914

Service:

ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

tain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

LAWRENCE MA METHUEN MA
MAY 25 1993
3 PM

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

ESSEX ESSEX MA CIB
PM
MA
1993

01 M/E 01990 MA 05/25/93 PM

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

AEP INDUSTRIES #1
20 KNICKERBOCKER
MOONACHIE NJ 07074

4. Article Number

P278591916

ervice:

red ☐ Insured
d ☐ COD
Mail ☐ Return Receipt for Merchandise

ain signature of addressee
and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Domenic [illegible]

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

NORTH JERSEY, NJ 07

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

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1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

AEROQUIP CORP.
222 WEST MAIN ST.
VAN WERT OH 45891

4. Article Number

P278591917

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Mail

ain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Lori Everson

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

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- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

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1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

AGC CORP (PS)
106 EVANSVILLE ST
MERIDEN CT 06450

4. Article Number

P278591918

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

tain signature of addressee and DATE DELIVERED.

5. Signature — Addressee

X Lorraine Lundy

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

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- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

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1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

AGWAY ENERGY
ON THE GREEN VERBANK
VERBANK NY 12585

4. Article Number
P278591919

Service:
☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Mail

ain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery
5-25-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

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- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

GMF MID-HUDSON NY 12
PM
05 MAY
1993

U.S. MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

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1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

AIROIL PRODUCTS
69 WESLEY ST
S.HACKENSACK NJ 07606

4. Article Number

P2J8591921

Service:

ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/25/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

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- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL®

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
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1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

AIRLINE PETROLEUM
PO BOX 187,WINOL A RD
CLARKS SUMMIT PA 18411

4. Article Number
P278591920

Service:
ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X Linda Jenkins

6. Signature — Agent
X

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

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- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ALLEGHENY CO-DEPT OF L
10 COUNTY OFFICE BLDG
PITTSBURGH PA 15219

4. Article Number

P278591922

Service:

- ☐ Registered
- ☐ Insured
- ☐ Certified
- ☐ COD
- ☐ Express Mail
- ☐ Return Receipt for Merchandise

obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

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- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

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1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ALLIANCE TOOL DIVISION
400 TRABOLD RD
ROCHESTER NY 14624

4. Article Number
P28591924

Service:
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X J Marino

6. Signature — Agent
X

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*
400 Trabold

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

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- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ALLIED SINTERINGS
29 BRIARIDGE RD
DANBURY CT 06810

4. Article Number
P278591925

Service:
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X P. M. Uneland X

6. Signature — Agent
X

7. Date of Delivery
5-21-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

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- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

AMERICAN AIRLINES
HANCOCK AIRPORT
N. SYRACUSE NY 13212

4. Article Number

P278591927

Service:

tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/22/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

AMRESCO
30175 SOLON INDUSTRIAL PK
SOLON OH 44139

4. Article Number

Service:

ered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X 5 2493

6. Signature — Agent
X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

CLEVELAND, OH 4
PM
24 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

Is your RETURN Address completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

ANAREN MICROWAVE, INC
CORPORATE HEADQUARTERS
E. SYRACUSSE NY 13057

4a. Article Number

P 353 158 184

4b. Service Type

☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

5-21-93

5. Signature (Addressee)

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

SYR NY 132 05-21-93 PM #6

Official Business

3 SYRACUSE NY 132
F 1
1
1993

PENALTY FOR PRIVATE USE TO AVOID PAYMENT OF POSTAGE, $300

U.S. MAIL

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: MS. SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ANHUESER BUSCH
2970 BELGIUM RD
BALDWINSVILLE NY 13027

4. Article Number

P278591929

Service)
ered
ed
ss Mail

☐ Insured
☐ COD
☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

May 24, 1993

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SYR NY 132 05/24/93 PM #5

SYRACUSE, NY 132
PM
24 MAY
1993

CONQUER
MULTIPLE
SCLEROSIS

U.S. MAIL

PENALTY FOR PRIVATE
USE, $300

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ANITEC INTL PAPER IMAG
40 CHARLES ST
BINGHAMTON NY 13902

4. Article Number

P278591930

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

tain signature of addressee and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

05/24/93 PM BING NY 139

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

APS INC
7600 TYLER BLVD
MENTOR OH 44060

4. Article Number
P 278 591 832

Service:
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X K. Rollendorsky

6. Signature — Agent
X

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

CLEVELAND, OH 441
PM
24 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

R APEX
N AVE
CKET RI 02862

4. Article Number
P071 550110

Type of Service:
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X Robert Burke

6. Signature — Agent
X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

APOLLO METALS INC
1001 14TH AVE.
BETHLEHEM PA 18018

4. Article Number
P278591931

Service:
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

ered
ed
ss Mail

tain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery
5/24/88

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

LEHIGH VALLEY, PA
PM
24 MAY
1993

LUPDC 180 05/24/93

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ARIES AUTOMOTIVE OF SOMERS
RT 12, RT 100
SOMERS NY 10587

4. Article Number

P278591933

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

ered
ed
ss Mail

otain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete Items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

WESTCHESTER, NY 105
AM
24 MAY
1993

U.S. MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ARMSTRONG WORLD INDUSTRIES
RTE. 441, PO BOX 169
MARIETTA PA 17547

4. Article Number
P278591934

Service:
- ☐ Registered
- ☐ Insured
- ☐ Certified
- ☐ COD
- ☐ Express Mail
- ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X Harry Sheets

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

LANCASTER PA (176) 05/24/93 DCR #28

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

MARIETTA, PA
MAY 24
PM
1993
17547

U.S. MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ARVIN CALSPAN CORP.
GENESEE ST
BUFFALO NY 14225

4. Article Number

P2878591935

Service: SEO

tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X M Lorey

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

BUFFALO, NY CONCENTRATED BR. MAY 24 1993 USPS

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ATLANTIC REFINING (A)
540 PORTLAND AVE
ROCHESTER NY 14621

4. Article Number

P278591938 40

ervice:

red ☐ Insured
d ☐ COD
s Mail ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Rachel [signature]

7. Date of Delivery

5/22/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

RDC NY 145 19:34 05/24/93 #2

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ATLANTIC REFINING (B)
828 RIDGE RD W.
WEBSTER NY 14580

4. Article Number

P278591938

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

tered
ied
ss Mail

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/20/13

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

BUFFALO, NY 142
22 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ATLANTIC REFINING (C)
3930 DEWEY AVE
ROCHESTER NY 14621

4. Article Number

P278591941

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tered
...ed
...ss Mail

...btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Amy Beitman

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL®

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ATLANTIC REFINING (D)
2272 CULVER RD
ROCHESTER NY 14609

4. Article Number

P278591942

Service:

ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Michael J George

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

ROCHESTER, NY BEECHWOOD TA USP

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

RDC NY 146 16:21 11/25/93 #3

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ATLANTIC REFINING (E)
NORTH AND EAST AVE
CALDONIA NY 14423

4. Article Number

P278591943

ervice:

red ☐ Insured
d ☐ COD
s Mail ☐ Return Receipt for Merchandise

tain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

X James E Satter

6. Signature — Agent

X

7. Date of Delivery

5-22-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

BUFFALO, NY
MAY 22

U.S. MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ATTICA CORRECTIONAL FCLTY
EXCHANGE STREET
ATTICA NY 14011

4. Article Number

P278591946

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

ered
ed.
s Mail

otain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL®

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

B & B GREENBERG CO.
333 W.RIVER ST
PROVIDENCE RI 02904

4. Article Number
P278591947

Service:
ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X Rita A. Laflamme

6. Signature — Agent
X

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
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- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

BAILEY MANUFACTURING
~~BENNETT STATE~~ ROAD
FORESTVILLE NY 14062
P.O. Box 356

4. Article Number
P278591948

Service:
tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery
05-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

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- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

BALLETMAKERS, INC
788 BLOOMFIELD AVE
CLIFTON NJ 07012

4. Article Number

P278591949

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

ered
ed
s Mail

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X C. Europa

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

MAY 24 1993

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

BARRNET LITHO, INC.
307 N. COMBUR AVE
JOHNSTOWN NY 12095

4. Article Number

P278591951

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Doug McLeod

7. Date of Delivery

5-24-3

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

122 PM 05/24/93 DCR#12

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

A2

BARRE ENGRAVING CO.
322 N. PENNA AVE
WILKES BARRE PA 18702

4. Article Number

P278591950

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

MAY 24 1993

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete Items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

BATTERY ENGINEERING,INC
1636 HYDE PARK AVE
HYDE PARK MA 02136

4. Article Number

P278591590

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

BOSTON, MASS. MAY 24 1993 HYDE PARK

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

BOSTON MA 021
PM
24 MAY
1993

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

BELOIT MANHATTAN
PO BOX 157
CLARK SUMMIT PA 18411

4. Article Number
P278591953

Service:
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

ered
ed
s Mail

tain signature of addressee or agent and DATE DELIVERED. 5/24/93

5. Signature — Addressee
X

6. Signature — Agent
X Tiffany A Sanders

7. Date of Delivery
5.24

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

BLIEM STEEL
1500 COINING DR
TOLEDO OH 43612

4. Article Number

P278591954

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tered
...ied
...ss Mail

...obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.,
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

BLILEY ELECTRIC
2545 W. GRANDVIEW BLVD.
ERIE PA 16512

4a. Article Number

P353 158 185

e Type
red ☐ Insured
d ☐ COD
s Mail ☐ Return Receipt for Merchandise

f Delivery

5-20-93

5. Signature (Addressee)

6. Signature (Agent)

Judith Mistretta

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1991 ★U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

BLUE CHIP PRODUCTS, INC
1 NEWBOLD RD
FAIRLESS HILLS PA 19030

4. Article Number
P278591955

Service:
tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

otain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X J. Gorman

6. Signature — Agent
X

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

ADELPHIA, PA
PM
MAY

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2, when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

BLUE GRASS CHEMICAL SP
895 INDUSTRIALS BLVD.
NEW ALBANY IN 47150

4. Article Number

P278591956

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Dina Dunn

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

LOUISVILLE KY 402
UM
24 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL®

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

BOSTON COACH
1 AIRFORCE ROAD
EVERETT MA 02149

4. Article Number

P278591957

Service:

tered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt for Merchandise

Retain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X H. Mancuso

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

BOSTON, MA 02149 USPS

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

Is your RETURN ADdd on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

BRAINERD MANUFACTURING CO.
115 N. WASHINGTON STREET
E. ROCHESTER NY 14445

4a. Article Number

P353 158 186

vice Type

stered ☐ Insured

fied ☐ COD

ess Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

MAY 20 1993

5. Signature (Addressee)

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

PS Form **3811**, December 1991 ☆U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

RDC NY 146 18:28 06/20/93 #2

Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

BRIDON AMERICA CORP.
STEVENS LANE
EXETER PA 18043

4. Article Number

P278591958

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X 7

6. Signature — Agent

X Mona Suepler

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Bright Star Industry
380 Stewart Road
Hanover Ind. Estates
Wilkes Barre, P.A.
18706-1459

4a. Article Number

P841 768 815

4b. Service Type

☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

9-14-93

5. Signature (Addressee)

Attn: William Vogt.

6. Signature (Agent)

X Brenda Castellani

8. Addressee's Address (Only if requested and fee is paid)

SEP 14 1993

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

Print your name, address and ZIP Code here

U.S. E.P.A.
26 FEDERAL PLAZA, RM 759
NEW YORK, NY 10278

ATTN: SUSANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

BROAD COVE TRUST
MEDOMAK ROAD
BREMEN ME 04551

4. Article Number
P278591960

Service:
ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery
5-22-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

BRUNSWICK TIMES RECORD
PO BOX 10, INDUSTRY RD
BRUNSWICK ME 04011

4. Article Number
P878591961

Service:
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X Glenda Grant

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card n being returned to you. The return receipt fee will provide you the name of the person delivered to and date of delivery. For additional fees the following services are available. Consult postmaster for fees l check box(es) for additional service(s) requested.

☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*

2. ☐ Restricted Delivery *(Extra charge)*

Article Addressed to:

BUCKEYE PIPELINE
GATES ROAD
AUBURN NY 13021

4. Article Number
P278591962

Service:
ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

otain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X R. J. Rourke

6. Signature — Agent
X

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

BUCKNER OIL SERVICE INC
SLOOP HILL RD
NEW WINDSOR NY 12553

4. Article Number P274591964

Service:

- tered ☐ Insured
- ied ☐ COD
- ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery 5-22-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

GMF MID-HUDSON NY 125
PM
22 MAY
1993

U.S. MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

BUFFALO COLOR CORP.
100 LEE ST
BUFFALO NY 14210

4. Article Number
P28591965

Service:
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X C M Kew

6. Signature — Agent
X

7. Date of Delivery
5/24

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

BUFFALO FREE TRADE COMPLEX
85 RIVER ROCK DRIVE
BUFFALO NY 14207

4. Article Number

P278591966

Service:

tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Bill D. Wolf

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

BUFFALO, NY 142
PM
26 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S. MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

BURROUGH HALL
8 N. MAIN ST
ALLENTOWN NJ 08501

4. Article Number
P278591967

Service:
tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X Sarah Culver

7. Date of Delivery
5.24.93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

TRENTON NJ 086
PM
24 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

BUS INDUSTRIES OF AMERICA
PO BOX 449 RD 1
ORISKANY NY 13424

4. Article Number
P278591968

Service:
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL®

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

C.R.BARD CATHETER & INSTRUMENT
266 BAY RD
GLENS FALLS NY 12804

4. Article Number

P278591969

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

tered
ied
ss Mail

obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/24

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

ALBANY, NY 12212
P4
24 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

CARBO THERM
175 PHILMONT AVE
FEASTERVILLE PA 19053

4. Article Number
P278591970

Service:
tered ☐ Insured
fied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X Nina Lyons

6. Signature — Agent
X

7. Date of Delivery
3/24/92

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

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- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

ANGHORNE, PA
MAY 24
1993
USA

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

CCL CUSTOM MANUFACTURING
35 MARTIN ST
CUMBERLAND RI 02864

4. Article Number

P278591972

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tered
...ed
...ss Mail

...btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X N. Bessette

6. Signature — Agent

X C. Bertrain

7. Date of Delivery

JUL 24

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

PROV RI *02904* PM 05/24/93 21:25 #13

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

PROVIDENCE, RI 029
PM
MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S. MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

CENTRAL INDUSTRIAL LABS (P.I.)
80 FLAGSHIP DRIVE
N. ANDOVER MA 01810

ANDOVER SERVICE CENTER P.I.R.
RECEIVED
08 MAY 24 1993 31
MAIL
LOWELL ... ANDOVER MA 05501

4. Article Number

P278591973

Service:

- ...tered
- ...ied
- ...ss Mail
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (*ONLY if requested and fee paid*)

MDSX-ESSEX MA GMF
MAY 24 1993

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

CHALLENGE MFG
3079 THREE MILE RD
WALKER MI 49504

4. Article Number

P278591974

Service:

...ered ☐ Insured
...ed ☐ COD
...ss Mail ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

GRAND RAPIDS, MI
NORTHWEST STA.
USPS
MAY 23 1993

5. Signature — Addressee

X

6. Signature — Agent

X Andr T. W. H.

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

GRAND RAPIDS, MI 493
PM
25 MAY
1990

U.S. MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

CHAMPION PRODUCTS
200 NORTH MAIN PO BOX 87
PERRY NY 14530

4. Article Number

P278591975

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

ered
ed
s Mail

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X T Benedict

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

RDC NY 146 19:19 05/24/93 #2

MAY 1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

CHARM GRAPHICS INC.
PO BOX 211
BUFFALO NY 14225

4. Article Number

P278591976

Service:

ered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X R. Ortega

7. Date of Delivery

BUFFALO, NY CHEEKTOWAGA
MAY 24 1993
USPS

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-816 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

CHEMICAL LEAMAN TANK LINE
102 PICKERING WAY
EXTON PA 19341

4. Article Number

P278591978

Service:

ered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

EXTON, PA USPO MAY 23 4 1998

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

EASTERN, PA 195
PM
24 MAY
1993

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

CHEMCLENE CORPORATION
258 N. PHOENIXVILLE PIKE
MALVERN PA 19355

4. Article Number

P278591977

Service:

tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/24

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

EASTERN, PA
PM
25 MAY
1993

U.S. MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

CHEMICAL PROCESS & SPLY
3257 MIDDLE RD
DUNKIRK NY 14048

4. Article Number

P278591979

Service:

☐ Registered
☐ Insured
☐ Certified
☐ COD
☐ Express Mail
☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

DUNKIRK NY
MAY 24 1993
PM

5. Signature — Addressee

X

6. Signature — Agent

X Pat Mitchell

7. Date of Delivery

5-24-93 DB

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

BUFFALO, NY 142
PM
24 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

CHESTER HOIST
7573 STATE RT. 45
LISBON OH 44432

4. Article Number

P278591980

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X T F Bower

6. Signature — Agent

X

7. Date of Delivery

8-27-92

8. Addressee's Address *(ONLY if requested and fee paid)*

L Po

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

Is your RETURN ADd on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

CHISLOM RYDER CO
COLLEGE & HIGHLAND AVES.
NIAGARA FALL NY 14301

4a. Article Number

P353 158 187

rvice Type

istered ☐ Insured

tified ☐ COD

ress Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)

6. Signature (Agent)

Carl C Malenverni

8. Addressee's Address (Only if requested and fee is paid)

PS Form **3811**, December 1991 ☆U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business

BUFFALO, NY 142
PM
21 MAY
1993

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

CHROMIUM CORPORATION
8701 UNION AVENUE
CLEVELAND OH 44105

4. Article Number

P287859198 3

Service:

tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X B. Kondik

6. Signature — Agent

X

7. Date of Delivery

5-24-93 [signature]

MAY 24 1993

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-236-[illegible] DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

CITY OF SYRACUSE-DPW
1200 CANAL STREET, EXT.
SYRACUSE NY 13210

4. Article Number

P278591984

Service:

ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Lee Warford

7. Date of Delivery

5/25/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE STR NY 132 05/25/93 PM #6

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

03

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

CITY PUMP & TANK
PO BOX 17186 1723 CLIFFORD AVE
ROCHESTER NY 14609

4. Article Number

P278591985

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

Kathryn L. Bauer Cornell

7. Date of Delivery

052693

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

RDC NY 146 19:07 05/06/93 #2

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

CLARK GRAVE VAULT
175 E. 5TH AVE
COLUMBUS OH 432..

4. Article Number

P278591986

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery MAY 25 1993

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete Items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL®

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

CODO MFG.
AVE. B
LEETSDALE PA 15056

4. Article Number

P2[illegible]8591987

Service:

ered A8 ☐ Insured

ed ☐ COD

s Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X [signature]

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

PITTSBURGH, PA 152
PM
24 MAY
1993

SENDER INSTRUCTIONS.

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

COMFORT DESIGN, INC.
263 SCHUYLER AVENUE
KINGSTON PA 18704

4. Article Number

P278591988

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Sarah Miller

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

PM

24 MAY 1993

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

COMMANDER MOTBY
ATTN:MTEA-GB-EHE BLDG.
BAYONNE NJ 07001

4. Article Number

P278591989

Service:

ered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

MAY 25 1993

8. Addressee's Address *(ONLY if requested and fee paid)*

05

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

COMMUNITY MEDICAL CENT
1800 MULBERRY ST
SCRANTON PA 18510

4. Article Number
P278591990

Service:
tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery
MAY 24 1993

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete Items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

SCRANTON PA 185 #1 05/24/93

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

Is your RETURN ADDRESS on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

COMPUTER CONSOLES, INC
97 HUMBOLDT STREET
ROCHESTER NY 14609

4a. Article Number

P 353 158 188

4b. Service Type

☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

5-24-93

5. Signature (Addressee)

Royce Mitchell

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

PS Form **3811**, December 1991 ★U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

ROC NY 146 17:28 05-24-93 #2

Official Business

ROCHESTER, NY 146
24 M
1993

PENALTY FOR PRIVATE USE TO AVOID PAYMENT OF POSTAGE, $300

U.S. MAIL

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

CONSTRUCTION SPECIALTIES
RTE 405
MUNCY PA 17756

4. Article Number

P278591992

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

ered
ed.
ss Mail

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Greg Shumagan

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

CONTROL CHIEF CORPORATION
~~14 EGBERT ROAD~~
~~LEWIS RUN PA 16738~~
PO Box 141
BRADFORD PA 16701

4a. Article Number

P 353 158 190

4b. Service Type

☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

5-4-93

5. Signature (Addressee)

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1991 ★U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business

DUBOIS PA 15801
PM
21 MAY
1993

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

CORSON MFG. CO.,INC
20-24 MICHIGAN STREET
LOCKPORT NY 14094

4. Article Number

P278591994

Service:

tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X C. Tayler

7. Date of Delivery

05-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

FB

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

BUFFALO, NY 142
PM
24 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

03

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ALPINE PRESS
100 ALPINE CIRCLE
STOUGHTON MA 02672

4. Article Number

P278591926

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

01 BROCK NO 02401 17:04 05/24/93

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

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1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

CREATIVE PRINTING
2011 E. MAIN ST
ENDWELL NY 13760

4. Article Number

P278591995

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

ered
ed
ss Mail

otain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Donna Wilcox

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

10/24/93 FM BING NY 139

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

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1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

CREST FOAM
100 CAROL ST
MOONACHIE NJ 07074

4. Article Number
P278591996

Service:
ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X Florence DeFlippo

6. Signature — Agent
X

7. Date of Delivery
5/21

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

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SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

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1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

CRETER VAULT CORP.
RTE 202 SOUTH, BOX 751
FLEMINGTON NJ 08822

4. Article Number

P278591997

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

5/24/93

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

KILMER 6MF NJ 088
PM
24 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

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1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

DUR IRON CO. INC
4542 HARDPAN ROAD
ANGOLA NY 14006

4. Article Number
P278592113

Service:
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

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1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

DYNAMIC HYDROBLASTING
2625 E. BROADWAY
ALTON IL 62002

4. Article Number

P278592114

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

15 MAY 91

8. Addressee's Address *(ONLY if requested and fee paid)*

U.S. Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

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- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

SAINT LOUIS MO 631
P.M.
27 MAY
1993

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

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1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

EM CORP.
16470 EAST 13 MILE ROAD
ROSEVILLE MI 48066

4. Article Number

P278592124

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tered
...ied
...ss Mail

...btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Susan M. DeVay

6. Signature — Agent

X

7. Date of Delivery

5-22-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

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- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

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1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

EASTERN COLOR & CHEMICAL
35 LIVINGSTON ST
PROVIDENCE RI 02940

4. Article Number

P278592115

Service:

ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X M. [illegible]

7. Date of Delivery

MAY 24 1993

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

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- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

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1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

EASTERN CONSOLIDATED AND DIST.
2244 OLD GETTYSBURG RD
CAMP HILL PA 170..

4. Article Number

P278592116

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X C Giese

6. Signature — Agent

X

7. Date of Delivery

5-25-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

G.PA 1?0 (?1?1?0) DCR#3 05/25/83 PM

SENDER INSTRUCTIONS

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U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

EASTERN ELEC APPARATUS
160 TOPLEY STREET
SPRINGFIELD MA 01104

4. Article Number

P278592117

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X C. Pidley

7. Date of Delivery

MAY 24 1993

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

11 SPFLD MA 20:10 OFFICIAL BUSINESS

05/24/93 #1

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

EASTERN INDUSTRIES
RTE 61 & 90
SHAMOKIN PA 17889

4. Article Number

P278592118

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

6-25-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

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- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
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1. ☑ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

EATON CORP
240 6TH ST
MASSILLON OH 44647

4. Article Number
P278592119

Service:
☐ Insured
☐ COD
☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X Jeanne Booth

6. Signature — Agent
X

7. Date of Delivery
5/24

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

CANTON, OH 447
PM
24 MAY
1993

GOODWILL INDUSTRIES
OUR BUSINESS WORKS
FOR DISABLED PEOPLE

U.S.MAIL

PENALTY FOR PRIVATE
USE, $300

SENDER INSTRUCTIONS

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- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

EGGERS INDUSTRIES
164 N. LAKE ST
NEENAH WI 54956

4. Article Number

P278592120

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

tered
ied
ss Mail

obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Jan A Mich

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

MAY 25 1993

USPS

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL®

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

EICHEL BERGERS
841 W. TRIDLE RD
MECHANICSBURG PA 17055

4. Article Number
P278592121

Service:
ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X Ann Wright

6. Signature — Agent
X

7. Date of Delivery
5-22-93 AER

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

LANCASTER PA 17 05/24/93 OCR #1B

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

HARRISBURG PA 17 PM 24 MAY 22 1993

DEFEAT MUSCULAR
PHY
MOZA

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

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- Endorse article "Return Receipt Requested" adjacent to number.

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ELCO CORPORATION
INDUSTRIAL PARK
HUNTINGTON PA 16632

4. Article Number

P278592122

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tered
...ed
...ss Mail

...btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Judy A Stringer

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ELECTRIC MATERIALS CO
50 S.WASHINGTON STREET
NORTH EAST PA 16428

4. Article Number

P278592123

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

MAY 24 1993

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

PM

25 MAY

1993

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

THE ELECTRIC MATERIALS CO
50 S.WASHINGTON ST
NORTHEAST PA 16428

4. Article Number
P071550086

Service
ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery
MAY 24 1999

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

3

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL®

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ENVIRONMENTAL DEPOT (PS)
339 PINE ST
BURLINGTON VT 05401

4. Article Number

P278592126

Service:

tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Penny McGrath

7. Date of Delivery 5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ENVIRONMENTAL WASTE MGMT
RD4 BOX 4126
MOHNTON PA 19540

CC

4. Article Number
P278592127

Service:
☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery
5-24

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and address of delivery's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

EPICURE PRODUCTS, INC.
25 HALE ST
NEWBURYPORT MA 01950

4. Article Number

P278592128

Service:

- ☐ Registered
- ☐ Certified
- ☐ Express Mail
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ERIE COUNTY WATER AUTH.
STURGEON POINT ROAD
DERBY NY 14047

4. Article Number
P278592129

Service:
ered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt for Merchandise

obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X Joseph W. Kaminski

6. Signature — Agent
X

7. Date of Delivery
5-22-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ERIE INSURANCE GROUP
100 ERIE INSURANCE PLACE
ERIE PA 16530

GB

4. Article Number

P278592130

Service:

ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery MAY 22 1993

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ERIE PLASTICS
1 PLASTICS RD
CORRY PA 16407

4. Article Number
P 878 592 131

Service:
☐ Insured
☐ COD
☐ Return Receipt for Merchandise

...obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X Margie Martin

6. Signature — Agent
X

7. Date of Delivery
5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

ERIE, PA 165
PM
24 MAY
1993

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ETI TANK CLEANING SERV
1500 ORENDA
MEMPHIS TN 38107

4. Article Number
P278592132

Service:
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X J. Morgan

6. Signature — Agent
X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

MEMPHIS, TN 3
PM
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

EUREKA SECURITY PRINTING
101 CHURCH ST.
JESSUP PA 18434

4. Article Number

P278592133

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

ered
ed
s Mail

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

05-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS SCRANTON PA 185 #1 05/24/93

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

FANCHER FURNITURE
100 ROCHESTER ST
SALAMANCA NY 14733

4. Article Number

P278592135

Service:

tered ☐ Insured
ied ☐ COD
se Mail ☐ Return Receipt for Merchandise

btain signature of addressee
and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Patrick C. Sen

7. Date of Delivery

SALAMANCA N.Y. 14779 MAY 24 1993 U.S.

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-235-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

BUFFALO, NY 142
PM
24 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S. MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

FERRO CORPORATION (VESUVIUS)
661 WILLET ROAD
BUFFALO NY 14218

4. Article Number
P278592136

Service:
tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X Gerr Smith

6. Signature — Agent
X

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

BUFFALO NY 142
PM
23 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

FISHER INDUSTRIAL SVCE INC
RT. 9, BOX 3984
GADSDEN AL 35903

4. Article Number
P278592138

Service:
ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X Linda Jordan

6. Signature — Agent
X

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

BIRMINGHAM AL 352
PM
24 MAY
1993

U.S. MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

FISHER PRICE TOYS
711 PARK AVENUE
MEDINA NY 14103

4. Article Number

P278592139

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

ered
ed
s Mail

otain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Susan Green

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address (ONLY if requested and fee paid)

MAY 24 1993 NY 14103

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

BUFFALO, NY 142
PM
24 MAY
1993

U.S. MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

FLACH INDUSTRIES
RTE 9W PO BOX 246
GLENMONT NY 12077

4. Article Number

P278592140

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Jeanette Hager

6. Signature — Agent

X

7. Date of Delivery

5-25-93

8. Addressee's Address *(ONLY if requested and fee paid)*

GLENMONT NY 12077 MAY 25 1993

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

122 PM 05/25/93 #13

ALBANY, NY 122
PM
25 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

FLINT INK
3520 E. FEDERAL STREET
BALTIMORE MD 21213

4. Article Number
P278592141

Service:
ered
ed
s Mail

☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X Inge Marks

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

FOAMEX PRODUCTS, INC.
466 SHADY AVENUE
CORRY PA 16407

4. Article Number

P278592142

ervice:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

tain signature of addressee
nd DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

ERIE PA 165
PM
24 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

FOSECO, INC.
20200 SHELDON RD
CLEVELAND OH 44142

4. Article Number

P278592144

Service:

tered ☐ Insured
ied ☐ COD
ss Mail_ ☐ Return Receipt for Merchandise

obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

10 BOSTON, MA 02[illegible] 05/26/93 [illegible]

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

BOSTON, MA 021 3
PM
26 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S. MAIL

PENALTY FOR PRIVATE USE, $30

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

FORMS, INC
PENN TURNPIKE
WILLOW GROVE PA 19090

4. Article Number
P278592143

Service:
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X Theresa Bear

6. Signature — Agent
X

7. Date of Delivery
MAY 24 1993

8. Addressee's Address *(ONLY if requested and fee paid)*
MAY 24 1993

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

PHILADELPHIA, PA 19
PM
24 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

Begin an Adventure of Giant Proportions. Collect Stamps!

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

FRAMINGHAM WELDING
120 LELAND ST
FRAMINGHAM MA 01701

4. Article Number

P278592145

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

MAY 24

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

05/24/93 22:05 DCR1 WDR 09 01613

PM

24 MAY

1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

FRANK ELECTRIC CORP.
700 WILLOW SPRINGS LANE
YORK PA 17405

4. Article Number

P278592146

Service:

...ered ☐ Insured
...ed ☐ COD
...ss Mail ☐ Return Receipt for Merchandise

...btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Beverly LePage

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

MAY 24 1993

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

FRICK CO.
345 W. MAIN STREET
WAYNESBORO PA 17268

4. Article Number

P278592147

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Cpl. Michael L. Kelly

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

HARRISBURG, PA 171
PM
24 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

FRUEHAUF CORP
RT 119 NORTH
UNION TOWN PA 15401

4. Article Number
P278592148

Service:
☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X John Eccles

6. Signature — Agent
X

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

GREENSBURG, PA 15601
PM
24 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S. MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card ...eing returned to you. The return receipt fee will provide you the name of the person delivered to and date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

FUJITECH
72 SHARP ST
HINGHAM MA 02043

4. Article Number

P278592149

Service:

...tered ☐ Insured
...ied ☐ COD
...ss Mail ☐ Return Receipt for Merchandise

...btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X David S Colonna

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

BOSTON MA 0213
PM
24 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL®

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

FULLER CO.
236 CHERRY ST.
MANHEIN PA 17545

4. Article Number

P278592150

Service:
red
d
s Mail

☐ Insured
☐ COD
☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Glotfelter Fuller Co.

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

LANCASTER PA (17) 05/24/93 DCR #18

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL®

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

G.W. LISK CO., INC.
2 SOUTH STREET
CLIFTON SPRINGS NY 14432

4. Article Number

Service:
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X D. W. Lisk (p)

6. Signature — Agent
X

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

RUC NY 146 20:23 05/24/93 #4

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

GARDENWAY MFG
29 102ND ST
TROY NY 12180

4. Article Number
P278592152

Service:
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X Cliff Sawyer

7. Date of Delivery
MAY 24 1993

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

ALBANY, NY 12233 PMI 24 MAY 1993

TROY NY 12180 MAY 24 1993 USPS

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

GEM CHEM, INC.
140 KLEINE LANE
LITITZ PA 17543

4. Article Number

P278592154

Service:

ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

otain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

LANCASTER CA 176
PM
2 MAR
1993

DEFEAT MUSCULAR DYSTROPHY SUPPORT MDAA

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

GENERAL CHEMICAL CORP
133 LEALAND ST.
FRAMINGHAM MA 01701

4. Article Number

P278592155

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

Peter Seymour

6. Signature — Agent

X

7. Date of Delivery

MAY 24

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

05/04/93 21:57 DCRN NOR MA 01613

PM

24 MAY

1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

GENERAL SERVICES ADMIN
FEDERAL BLDG. STATE ST.
MONTPELIER VT 05602

4. Article Number

P278592156

Service:

- ☐ Registered
- ☐ Certified
- ☐ Express Mail
- ☒ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X William H-Byler

7. Date of Delivery

5-26-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL®

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

GENESEE HOSPITAL
224 ALEXANDER STREET
ROCHESTER NY 14607

4. Article Number

P278592157

ervice:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

ain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

GENTEX CORPORATION
MAIN ST., RT. 171
SIMPSON PA 18407

4. Article Number
P278592158

Service:
ered
ed
s Mail

☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X Bob McDonald

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

GEORGE INDUSTRIES
1 SOUTH PAGE ST
ENDICOTT NY 13670

4. Article Number

P278592159

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

GICHNER MOBILE SYSTEMS
401 BRIDGE ST
OLD FORGE PA 18518

4. Article Number

P278592160

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Manarsh

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SCRANTON, PA 18503 P.M.

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S. MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

GIDDINGS & LEWIS
31700 SOLON RD
SOLON OH 44139

4. Article Number

P278592161

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Mail

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Mel Goetsch

7. Date of Delivery

5-26-93 MZ

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

GILBERT & BENNETT
N. MAIN ST.
GEORGETOWN CT 06229

4. Article Number

P278592162

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery 5/25/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

STMFD CT #009 21 01 05 [illegible] #5

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

GILBERT/COMMONWEALTH, INC.
PO BOX 618
LIBRARY PA 15129 9

4. Article Number

P278592163

Service:

- ered ☐ Insured
- ed ☐ COD
- s Mail ☐ Return Receipt for Merchandise

...obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Leonard Kirkhart

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

LIBRARY, PA MAY 24 1989

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL®

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when a[illegible]onal services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on th[illegible]verse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will [illegible]ovide you the name of the person delivered to and the date of delivery. For additional fees the following s[illegible]rvices are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

GLEDHILL RD MACHINE CO.
765 PORTLAND WAY SOUTH
GALION OH 44833

4. Article Number

P278592164

[illegible]ervice:

[illegible]red ☐ Insured
[illegible]d ☐ COD
[illegible]s Mail ☐ Return Receipt for Merchandise

[illegible]tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Sherrie L. Dill

7. Date of Delivery

GALION, OH 44833 MAY 24 1993 USPS

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

THE GLOBE NEWSPAPER CO
135 MORRISSEY BLVD
BOSTON MA 02107

4. Article Number

P071550088

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete Items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

GOLD MEDAL LADDER
21 REWEY AVENUE
NEWARK VALLEY NY 13811

4. Article Number
P278592165

Service:
tered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt for Merchandise

obtain signature of addressee or agent and DATE DELIVERED. 5-24-93

5. Signature — Addressee
X Peggy L. Pierce

6. Signature — Agent
X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

GOOD SAMARITAN HOSPITAL
700 NORWEGIAN STREET
POTTSVILLE PA 17901

4. Article Number

P278592166

Service:

ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X [signature]

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

READING, PA
P.M
24 MAY
'993

ALWAYS
USE ZIP CODE

U.S.MAIL

PENALTY FOR PRIVATE
USE, $300

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

GOURO NELSON
2155 WADHAMS RD
ST CLAIR MI 48074

4. Article Number

P278592168

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...d ... Mail

...in signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Linda Cummings

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

ROYAL OAK, MI 480
PM
24 MAY
1993

National Flag Day

14

Pause For The Pledge

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

GRAND HAVEN FURNITURE
715 ROBBINS RD
GRAND HAVEN MI 49417

4. Article Number

P278592169

Service:

ered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Scott O. Norton

7. Date of Delivery

5/24/93a2

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

GTE PRODUCTS CORP.
825 LEXINGTON AVENUE
WARRREN PA 16365

4a. Article Number

P353 158 191

4b. Service Type

☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

5-20-93

5. Signature (Addressee)

6. Signature (Agent)

R HART

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

ERIE, PA 165
PM
20 MAY
1993

Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

GTE SYLVANIA
835 WASHINGTON ROAD
ST MARYS PA 15875

4. Article Number
P278592170

Service:
ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X John Allwyn

6. Signature — Agent
X

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

H.B. IVES
50 IVES PLACE
NEW HAVEN CT 06511

4. Article Number

P278592171

Service:

tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

24 MAY 1993

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

NEW HAVEN, CT.065 DCR#13 03/24/93 22:31

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

HANDY & HARMAN TUBE CO
WHITEHALL & TOWNSHIP ROAD
NORRISTOWN PA 19403

4. Article Number

P278592172

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...ered
...ed
...s Mail

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

HARRIS CORP/RF COMMUNICATIONS
570 CULVER ROAD
ROCHESTER NY 14609

4a. Article Number
P353 158 192

4b. Service Type
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
5-20-93

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)
Kathy Santo

PS Form 3811, December 1991 ★U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

HASKELL OF PITTSBURGH
231 HASKELL LANE
VERONA PA 15147

4. Article Number

P278592173

Service:

ered BC ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Laura Hamilton

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

RECEIVED GMF PGH PA 152 05/24/93 PM FLOOR 6B

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

HAYDEN ENVIRONMENTAL
6015 MANNING RD
MIAMISBURG OH 45342

4. Article Number

P278592174

Service:

ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

otain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Brad Rhodes

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

DAYTON, OH 454
PM
MAY
1993

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

HEDSTROM CORPORATION
SUNNYSIDE RD
BEDFORD PA 15522

4. Article Number

P278592175

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Edna Arnetti

7. Date of Delivery

5-24-93

Edna Arnetti

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

JOHNSTOWN, PA 159
PM
21 MAY
1333

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

HENRY L. HINCKLEY CO.
SHORE RD
SOUTHWEST HARBOR ME 04679

4. Article Number

P278592176

Service:

ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Leah Tinker

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL®

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

THE HENRY HINCKLEY CO.
SHORE RD
SOUTHWEST HARBOR ME 04679

4. Article Number

P071550089

Service:

ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Leah Tinker

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL®

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

HESS & CLARK, INC.
SEVENTH & ORANGE ST
ASHLAND OH 44805

4. Article Number

P285592177

Service Type

- ☐ Registered
- ☐ Insured
- ☐ Certified
- ☐ COD
- ☐ Express Mail
- ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Amy L. Pickering

7. Date of Delivery

5-2-98

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-8 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

HONEY COMB SYSTEMS, INC
RET 111, PO BOX 502
BIDDEFORD ME 04005

4. Article Number SEB

P278 592179

Service:

ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

otain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Wayne Taylor

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

BIDDEFORD ME MAY 2 4 1989

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

HOWARDS EXPRESS
E.NORTH STREET
GENEVA NY 14456

4. Article Number

P071550525

Service:

tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

GENEVA, NY
MAY 24
1990

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

RDC NY 146 17:30 05/24/93 #3

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

HUB FOLDING BOX CO.,INC
774 NORTH ST
MANSFIELD MA 02048

4. Article Number
P071550524

Service:
tered ☐ Insured
fied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery
5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

HUNTINGDON ANALYTICAL SVC
144 TELEGRAPH
MIDDLEPORT NY 14105

4. Article Number

P071550523

Service(s)

tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X D. Barber

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

BUFFALO NY 142
PM
24 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. HUTCHINSON HOUSEHOLD (PS)
ROUTE 2/PO BOX 253
PLAINFIELD VT 05667

4. Article Number
P071550522

Service:
red ☐ Insured
d ☐ COD
s Mail ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X Thomas Ray Gray

7. Date of Delivery
5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

BURLINGTON, VT 05
PM
24 MAY
1993

U.S. MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

HYDROSAMPLE DIVISION (PS)
367 W. MAIN ST
NORTHBORO MA 01532

4. Article Number

P071550521

Service:

ered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt for Merchandise

otain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Joan Garramone

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

05/24/93 20:11 DCK#3 [illegible]

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete Items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL®

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

IMAGING & SENSING TECHNOLOGY
WESTINGHOUSE CIRCLE
HORSEHEADS NY 14845

4. Article Number

P071550518

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

tered
ied
ss Mail

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Lori Willis

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

ELMIRA N.Y. 149 05/04/93 17:56

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

IMO INDUSTRIES
21611 TUNGSTEN RD
EUCLID OH 44117

4. Article Number

P071550517

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

CLEVELAND OH MAY 25 PM 1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

INDEPENDANT CABLE CO.
43 BROAD STREET
HUDSON MA 01749

4. Article Number

P071550516

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tered
...ied
...ss Mail

...btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X M. Flanders

6. Signature — Agent

X

7. Date of Delivery

5·24·93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

05/24/93 17:23 WORXX016133 OCR#2

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

WORCESTER, MA 01
PM
24 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

INDUSTRIAL VACUUM SERV.
4735 W. LAKE RD
DUNKIRK NY 14048

MAY 27 1993 DUNKIRK, NY USPO

4. Article Number
P071550514

Service:
ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X J Coulf

7. Date of Delivery
5/22/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

BUFFALO, NY 142
PM
22 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

INGERSOL-RAND CO.
101 N. MAIN ST
ATHENS PA 18810

4. Article Number

P071550513

Service:

tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE-DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Fred C. Gregory III

7. Date of Delivery

5-22-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

PA 187 OFFICIAL BUSINESS

WILKES-BARRE, PA 187
PM
22 MAY 1983

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

INTERMARK FLOCK CORP (A) (PS)
BAY STATE TRUCK, 527 WINTHROP
ROHOBOTH MA 02769

4. Article Number

P071550511

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tered
...ied
...ss Mail

...obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Jack Hoskins Jr

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

CSMS NATIONAL GUARD
BARNUM ST
FORT DEVONS MA 01433

4. Article Number

P278591999

Service:

tered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Thomas W Desmond

6. Signature — Agent

X

7. Date of Delivery

24 May 93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

09 BOSTON, MA 02210 05-27-93 PM

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

BOSTON MA 02210
27 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

CUSTOM DESIGN SERVICES
30 SOUTH STREET
DANBURY CT 06810

4. Article Number

P278592000

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...ered
...ed
...ss Mail

...btain signature of addressee
...and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Cherie Magnone

7. Date of Delivery

5-21-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

STAMFORD CT
PM
21 MAY
993

STMFD CT *089* 20:58 05/21/[illegible] $5

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

CYCLE CHEM, INC.
217 S. 1ST ST
ELIZABETH NJ 07206

4. Article Number

P278592001

ervice:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

ain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X O. Pleasants

6. Signature — Agent

X

7. Date of Delivery

5-24

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

D.C. AUTOMOTIVE
8262 GLEAN RD
HOLLAND NY 14080

4. Article Number
P278592003

Service:
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X Carol Haas

7. Date of Delivery
5-27-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

DANA CORPORATION
182 S. MAIN ST
FREDRICKSTOWN OH 43019

4. Article Number

P278592004

Service:

tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee and DATE DELIVERED.

5. Signature — Addressee

X Sandra S Lovett

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete Items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

DARWORTH COMPANY
50 TOWER LANE
AVON CT 06001

4. Article Number

P278592005

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-26-93

8. Addressee's Address *(ONLY if requested and fee paid)*

SIMSBURY CT MAY 26 1993 USPO

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

David F. Toomey, Esq.
Office of District Counsel
U.S. Dept. of Veterans Affairs
John F. Kennedy Federal Buildi
Boston, MA 02203

4a. Article Number
P 752 210 239

4b. Service Type
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
4-18-94

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)
[signature]

PS Form 3811, December 1991 ☆ U.S.G.P.O.: 1992-307-530 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

APR 2 2 1994

Print your name, address and ZIP Code here

U.S. ENVIRONMENTAL PROTECTION AGENCY
REGION II
OFFICE OF REGIONAL COUNSEL
NEW YORK/CARIBBEAN SUPERFUND BRANCH
26 FEDERAL PLAZA — ROOM 437
NEW YORK, NEW YORK 10278

Kissel

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Defense Fuel Supply Depot
Route 123
S. Harpswell, ME 04079
Attn: Harry W. Grinder

4a. Article Number
P752210238

4b. Service Type
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
4-16-91

5. Signature (Addressee)

6. Signature (Agent)
David S. Merriman

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1991 ☆ U.S.G.P.O.: 1992-307-530 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

PORTLAND, ME 041 04/16/94 21·12 DCR2

UNITED STATES POSTAL SERVICE

Official Business

PENALTY FOR PRIVATE USE TO AVOID PAYMENT OF POSTAGE, $300

U.S. MAIL

APR 20 1994

Print your name, address and ZIP Code here

U.S. ENVIRONMENTAL PROTECTION AGENCY
REGION II
OFFICE OF REGIONAL COUNSEL
NEW YORK/CARIBBEAN SUPERFUND BRANCH
26 FEDERAL PLAZA — ROOM 437
NEW YORK, NEW YORK 10278

Kissel

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

DEGRAFF MEMORIAL HOSPITAL
445 TREMONT ST.
N. TONAWANDA NY 14120

4. Article Number

P278592007

Service:

stered ☐ Insured
fied ☐ COD
es Mail ☐ Return Receipt for Merchandise

80

obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

NAWANDA, NY
MAY 25 1993
U.S.C.

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

DELEVAN INDUSTRIES
1728 WALDEN AVENUE
BUFFALO NY 14225

4. Article Number

P278592102

Service:

ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

otain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

Addressee's Address *(ONLY if requested and fee paid)*

6. Signature — Agent

X

7. Date of Delivery

BUFFALO, NY CITY STA. MAY 24 1993 USPS

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

DELMONTE CORPORATION
909 LINDEN AVENUE
ROCHESTER NY 14625

4. Article Number

P278592103

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

tain signature of addressee and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X D. Barlas

7. Date of Delivery

5-26-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

RUC NY 146 21:19 05/24/93 #4

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

DELTA RUBBER CO.
34 WAUREGAN RD
DANIELSON CT 06239

4. Article Number

P278592104

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Debra Malboeuf

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

DANIELSON CT 06239
MAY 24 1993

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO:

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

DELVECCHIO TRANSPORT
PO BOX 480
DUNMORE PA 18512

4. Article Number

P278592105

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

ered
ed
s Mail

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Marge Caprio

7. Date of Delivery

5-2-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

PM

24 MAY 1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

DENNISON OIL CO
25 MARION DRIVE
KINGSTON MA 02364

4. Article Number

P278592106

Service:

tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/25/89

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

DE STEFANO
34 COMMERCE WAY
WOBURN MA 01801

4. Article Number
P278592006

Service:
- ☐ Registered
- ☐ Certified
- ☐ Express Mail
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X Paul Stadman

6. Signature — Agent
X

7. Date of Delivery
5/24

8. Addressee's Address *(ONLY if requested and fee paid)*

WOBURN MA MAY 24 1993 USPS

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL®

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

DIAMOND EAST LABORATORY
WOODGLEN & ANTHONY RDS
GLEN GARDNER NJ 08826

4. Article Number

P278592107

Service:

ered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/22/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

THE DINGLEY PRESS
119 LISBON RD
LISBON ME 04250

4. Article Number
P071550085

Service:
ered
ed
ss Mail
☐ Insured
☐ COD
☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X Charles E. Hale

6. Signature — Agent
X

7. Date of Delivery
5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

PORTLAND, ME 041
PM
2 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

DONLEE TECHNOLOGY INC M
693 N. HILL RD
YORK PA 17402

4. Article Number
P278592108

Service:
red ☐ Insured
d ☐ COD
s Mail ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X H. Buckingham

7. Date of Delivery
MAY 24 1993

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

LANCASTER PA (1[illegible]) 05/24/93 OCR #16

PM
24 MAY
1993

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

DONSCO, INC.
NORTH FRONT ST
WRIGHTSVILLE PA 17368

4. Article Number
P278592109

Service:
tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X Jim Beck

6. Signature — Agent
X

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

HELP GOODWILL INDUSTRIES

HELP THE HAND

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

DRESSER MFG. DIVISION
41 FISHER AVENUE
BRADFORD PA 16701

4. Article Number
P278592110

Service:
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tered
...ed
...ss Mail

...ways obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery

BRADFORD
MAY
24
1993
PA

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-235-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

MAY 24 1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

DUNKIRK RADIATOR CORP.
85 MIDDLE ROAD
DUNKIRK NY 14048

4. Article Number

P278592112

Service:

- ☐ Insured
- ☐ COD
- ☑ Return Receipt for Merchandise

DUNKIRK NY
MAY
PM
1993
14048

...ature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X James W Taylor

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

BUFFALO, NY 142
PM
24 MAY
1993

U.S. MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

INTERNATIONAL PAPER CO
S.HIGHLAND ST
LOCKHAVEN PA 17745

4. Article Number

P071550509

Service:

ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

otain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X S.K. Baua

7. Date of Delivery

5 24 93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-236-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ITT HIGBIE
701 LUGHILL RD
ARCHBOLD OH 43502

4. Article Number

P071550507

Service:

tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Gary Overmier

7. Date of Delivery

MAY 27 1993

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

J.B. SLEVIN CO.INC.
300 EAST BALTIMORE AVE.
LANSDOWNE PA 19050

4. Article Number

P071550505

Service:

- ...ered ☐ Insured
- ...ed ☒ COD
- ...ss Mail ☐ Return Receipt for Merchandise

...btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X M Dorley

6. Signature — Agent

X

7. Date of Delivery

5-24-93 MF

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

ADELPHIA, PA 191
PM
MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

J & D AUTOMOTIVE
2190 CLINTON ST
BUFFALO NY 14206

4. Article Number

P071550506

Service:

ered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt for Merchandise

obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-22-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

d on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

J.M. CANTY
590 YOUNG ROAD
TONAWANDA NY 14150

4a. Article Number

P353 158 219

rvice Type

istered ☐ Insured

tified ☐ COD

ress Mail ☐ Return Receipt for Merchandise

e of Delivery

5-20-93

5. Signature (Addressee)

Pamela D. Go

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

is your RETURN AD

Thank you for using Return Receipt Service.

PS Form **3811**, December 1991 ☆U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

JAMESTOWN ELECTROPLATING WORKS
105 WATER ST
JAMESTOWN NY 14702

4. Article Number

P071550504

Service:

tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent, and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

BUFFALO, NY 142
PM
24 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

JESSUP DOOR CO.
300 E.RAILROAD ST
DOWAGIAC MI 49047

4. Article Number

P071550503

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Stuart Cline

7. Date of Delivery

5-27-97

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

Is your RETURN ADDRESS on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

JOSLYN MFG. & SUPPLY CO.
7574 EAST MAIN ROAD
LIMA NY 14485

4a. Article Number
P353 158 195

ice Type
tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

of Delivery
5/20

5. Signature (Addressee)
Wendy Gould

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

PS Form **3811**, December 1991 ☆U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

RDC NY 146 20:55 05/20/93 #2

Official Business

28 MAY 1993

PENALTY FOR PRIVATE USE TO AVOID PAYMENT OF POSTAGE, $300

U.S. MAIL

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

JOY MFG. CO.
3101 BROADWAY AVENUE
BUFFALO NY 14225

4a. Article Number

P 353 158 196

ice Type
ered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt for Merchandise

of Delivery

5. Signature (Addressee)

6. Signature (Agent)

Bill Rogers

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

KEENEY MANUFACTURING CO
1170 MAIN ST
NEWINGTON CT 06111

4. Article Number

P071550499

Service:

ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

A5

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

PM

1993

U.S. MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

KEM PLAYING CARDS
2-12 BECK PLACE
POUGHKEEPSIE NY 12601

4. Article Number

P071550498

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

ered
ed
ss Mail

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Kathleen Schuller

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

KENMORE TON.UNION FRE
1500 COLVIN BLVD.
KENMORE NY 14223

4. Article Number
P071550497

Service:
ered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

Is your RETURN AD[illegible]d on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

PO BOX 350
KENNECOTT-PROCESS EQUIPMENT
DIV BLDG W4-1 WALMORE RD
NIAGARA FALLS NY 14~~303~~
14304

4a. Article Number

P353 158 197

[illegible]rvice Type
[illegible]istered ☐ Insured
[illegible]tified ☐ COD
[illegible]ress Mail ☐ Return Receipt for Merchandise

[illegible]ate of Delivery

5-20-93

5. Signature (Addressee)

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

PS Form **3811**, December 1991 ☆U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business

BUFFALO, NY 142
PM
20 MAY
1993

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

KENSINGTON INDUSTRIES
69 PUBLIC SQUARE, SUITE 904
WILKES BARRE PA 18702

4. Article Number

P071550496

Service:

ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Ed Schuss

7. Date of Delivery

MAY 24 1993

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

KEYES FIBRE CO
100 COLLEGE AVENUE
WATERVILLE ME 04901

4. Article Number

P071550495

Service:

☐ Insured
☐ COD
☐ Return Receipt for Merchandise

...obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

KEYSTONE CARBON CO
1935 STATE ST
SAINT MARYS PA 15857

4. Article Number

P071550494

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

George Grau 5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

DUBOIS PA 15801
PM
11 MAY
1993

MODER 368

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

K-MART #7171
1460 FRENCH RD
DEPEW NY 14043

4. Article Number

P071550501

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

ered
ed
ss Mail

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X N. Demesy

7. Date of Delivery

5-22-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

DEPEW. N.Y.
MAY
22
1993
14043

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

KNOX SEMICONDUCTOR
ROCKPORT INDUSTRIAL PARK
ROCKPORT ME 04856

4. Article Number
P071550493

Service:
ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X Pamela J. Boudy

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

KOA SPEER ELECTRONICS, INC
BOLIVAR DRIVE
BRADFORD PA 16701

4. Article Number

P071550492

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Phyllis Bruscus

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

MLDER #68

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

KWIK FILL (A)
5251 W. RIDGE RD
PARMA NY 14559

4. Article Number

P071550491

Service:

tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Mark Kohrman

7. Date of Delivery

5/22/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

RDC NY 146 21:48 05/26/93 #3

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

BUFFALO, NY
MAY
22
PM
1993
142

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

KWIK FILL (B)
ELLICOTT & JACKSON
BATAVIA NY 14020

4. Article Number

P071550490

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Nicki Nash

7. Date of Delivery

5/22/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

BUFFALO, NY 142
FM
22 MAY
1993

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

LADESCO, INC.
150 DOW ST, TOWER #4
MANCHESTER NH 03101

4. Article Number

P071550489

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tered
...ied
...ss Mail

...btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Michele Dumas

7. Date of Delivery

SEP

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

MANCHESTER NH 031
PM
24 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

LANKENAU HOSPITAL
100 LANCASTER AVENUE
LYNNEWOOD PA 19096

4. Article Number

P071550488

Service:

ered ☐ Insured

ed ☐ COD

s Mail ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

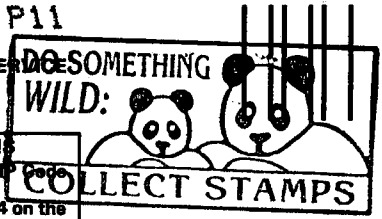
P11

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

PHILADELPHIA PA
PM
1988

DO SOMETHING WILD: COLLECT STAMPS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

LANNETT CO.,INC.
9000 STATE ROAD
PHILADELPHIA PA 19136

4. Article Number

P071550487

Service:

ered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt for Merchandise

otain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Mlli Watson

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PHILADELPHIA PA 25

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

PHILADELPHIA, PA 191
PM
25 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

LAPP INSULATORS
GILBERT ST
LEROY NY 14482

4. Article Number

P071550486

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tered
...ied
...ss Mail

...btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Chuck Reeder

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

RDC NY 146 16:07 05/24/93 #2

24 MAY 1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S. MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

LAVALLEY BUILDING SUPPLY (PS)
GUILD RD
NEWPORT NH 03773

4. Article Number

P071550485

Service:

ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Harold LaValley

6. Signature — Agent

X

7. Date of Delivery

5-22-93 MG

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

WHITE RIVER JUNCTION, VT 050
PM
22 MAY
1993

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

LEDGEMERE LAND CORP (PS)
290 ELIOT ST
ASHLAND MA 01721

4. Article Number

P071550483

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

LEJEUNE STEEL CO.
118 W. 60TH ST
MINNEAPOLIS MN 55419

4. Article Number
P071550482

Service:
tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery 5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

MINNEAPOLIS MN 554 AD
PM
24 MAY
1993

ALWAYS USE ZIP CODE

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

LELAND ELECTRO SYSTEMS
1200 LAWRENCE PKWAY
ERIE PA 16531

4. Article Number

P071550481

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery MAY 24 1993

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

LEVITON MANUFACTURING
745 JEFFERSON BLVD.
WARWICK RI 02886

4. Article Number

P071550480

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tered
...ed
...ss Mail

...btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X B. Hunter

6. Signature — Agent

X

7. Date of Delivery

5/24/93 MAY 24 1993

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S. MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

LEWIS CORP
102 WILLEN BROCK RD
OXFORD CT 06478

4. Article Number

P071550479

Service:

ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Shannon Abrams

6. Signature — Agent

X [illegible]

7. Date of Delivery

5/25/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

NEW HAVEN CT 06
PM
1 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL®

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

LEYBOLD
6500 FLY RD
E.SYRACUSE NY 13057

4. Article Number

P071550478

Service:

ered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Patty Powers

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL®

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

LG INDUSTRIES
WATES WORKS RD
WAGONTOWN PA 19376

4. Article Number

P071550477

Service:

ered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/25/98

8. Addressee's Address *(ONLY if requested and fee paid)*

EXTON PA MAY 25 1998 USPO

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

EASTERN DM 25 MAY 1993

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

LIBRALTER PLASTICS
3175 MARTIN RD
WALLED LAKE MI 48088

4. Article Number

P071550476

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X George Ownby

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

LLOYD MFG. CO.
130 FRANKLIN ST
WARREN RI 02885

4. Article Number

P071550475

ervice:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

WARREN RI 02885
MAY 23 1989
USPS

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

LOEWENGART & CO, INC.
209 OREGON ST
MERCERSBERG PA 17236

4. Article Number

P071550474

Service:

ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

.PA 170 OFFICIAL BUSINESS DCR#3 05/24/93 PM

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

LOOS & COMPANY, INC
RTE 101
POMFRET CT 06258

4. Article Number

P071550473

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...ered
...ed
...ss Mail

...btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Rose Kay

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

FORD, CT 5B

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

LORAL DEFENSE SYSTEMS
600 3RD ST
NEW YORK NY 10016

4. Article Number

P071550472

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...ered
...ed
...s Mail

...btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X B Weiss

6. Signature — Agent

X

7. Date of Delivery

5/21/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

LUCERNE PRODUCTS
7600 OLD EIGHT RD
HUDSON OH 44236

4. Article Number

071550471

Service:

tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

otain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Chan Selnik

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

AKRON PM 24 MAY 1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

LUMINITE PRODUCTS CORP
115 ROCHESTER ST
SALAMANCA NY 14719

4. Article Number

P 011550470

Service:

ered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X M.S.

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

MAY 24 1993

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

BUFFALO, NY 142
PM
24 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

LYN CONTRACTING CO.
221 HALLENE RD
WARWICK RI 02887

4. Article Number
P071550469

Service:
- ☐ Registered
- ☐ Certified
- ☐ Express Mail
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X Linda Schlafer

6. Signature — Agent
X

7. Date of Delivery
5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

PROU NJ *02904* PM 05/05/93 17:53 #13

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE HECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

LYONS TRANSPORTATION
141 EAST 26TH ST
ERIE PA 16504

4. Article Number

071550468

Service:

ered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt for Merchandise

otain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Judy Ahrens

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

MAINE YANKEE ATOMIC POWER
BAILEY'S POINT
WISCASSET ME 04578

4. Article Number

P071550467

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Kelly Burden

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

PORTLAND, ME 041
PM
24 MAY
1993

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

NC.-MARBLE SHOP (PS)
N ST
R VT 05765

4. Article Number
P071 550 408

Type of Service:
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery
5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

NEW YORK, NY 10278 PM 27 MAY 1993

PROCT 05765 MAY 24 1993

U.S. MAIL

PENALTY FO
USE,

OMYA
61 MA
PROCT

RETURN TO

Print Sender's name, address, and ZIP Code in the space belo

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☒ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Marc Equity Realty Associates
c/o Peter Ruppar, Duke...
2500 Main Place Tower
Buffalo, NY 14202

4a. Article Number
P 353 622 397

4b. Service Type
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
4-15-94

5. Signature (Addressee)

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

APR 28 1994

Print your name, address and ZIP Code here

U.S. ENVIRONMENTAL PROTECTION AGENCY
REG[illegible]
OFFICE OF [illegible] [illegible]NSEL
NEW YORK/CARI[illegible] [illegible] BRANCH
26 FEDERAL [illegible] [illegible]OM 437
NEW YORK, NEW YORK 10278

E. Kissel

SENDER: Complete items 1 and 2 when additional services are desired, and compl
3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent
from being returned to you. The return receipt fee will provide you the name of the person deliver
the date of delivery. For additional fees the following services are available. Consult postmaste
and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delive *(Extra charge)*

3. Article Addressed to:

MARCOR OF NEW YORK
120 ELMGROVE PARK
ROCHESTER NY 14624

4. Article Number

P071550

Service:

- ☐ tered
- ☐ ied
- ☐ ss Mail
- ☐ Insured
- ☐ COD
- ☐ Return Re for Merch

btain signature of addres
or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Paula Doctors

7. Date of Delivery

5-28-91

8. Addressee's Address *(ONL requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

RDC NY 148 80 39 05/24/93 #4

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

RKEL CORPORATION
HOOL LANE
RRISTOWN PA 19404

4. Article Number
P071 550 465

ype of Service:
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

lways obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X LARRY UUN.

7. Date of Delivery
5-25-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

RSEL MIRROR & GLASS PR
101 FOSTER AVE
OOKLYN NY 11236

4. Article Number
P071 550 464

ype of Service:
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

ways obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X Dwayne Rhodes

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

RTEC PLASTICS
01 W.THOMPSON RD.
NTON MI 48430

4. Article Number

P071 550 463

ype of Service:

☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

ways obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X X Sheryl Parker

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-816 DOMESTIC RETURN RECEIPT

05/24/93 21:17 FLINT MI 485

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

PROMPT CPO NY 10451 06:41 05/27/93 D[illegible]2

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

SS. TANK DISPOSAL
BASKIN DR
COPEE MA 01020

4. Article Number
P071 550 460

Type of Service:
- ☐ Registered
- ☐ Certified
- ☐ Express Mail
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

MAY 24 1993 MA

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

MCKAY PRESS, INC.
215 STATE STREET
MIDLAND MI 48690

4. Article Number

P071550455

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X William Carl

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

MEAD CORP.
9540 DORCHESTER AVE
CHICAGO IL 60628

4. Article Number

P071550454

ervice:

ared ☐ Insured
d ☐ COD
s Mail ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/25

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

MENTHOLATUM COMPANY INC
1360 NIAGARA STREET
BUFFALO NY 14213

4. Article Number

P071550452

Service:

ered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt for Merchandise

otain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Lowell T Merritt II

6. Signature — Agent

X

7. Date of Delivery

5-25

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
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- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

MERCHANTS BANK
1860 ERIE BLVD E
SYRACUSE NY 13221

4. Article Number

P071550451

Service:

tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X TS

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

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- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

MERCURY AIRCRAFT INC
17 WHEELER AVE
HAMMONDSPORT NY 14840

4. Article Number
P071550450

Service:
ered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X James M. Lisiefski

7. Date of Delivery
5/24/93 BF

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

ELMIRA, N.Y. 149 05/24/93 18:48

24 MAY 1993

ALWAYS

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

MERCY HOSPITAL
144 STATE STREET
PORTLAND ME 04101

4. Article Number

P071550449

Service:

tered ☐ Insured
ied ☐ COD
ce Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PORTLAND ME
MAY 24 1993
USPS

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

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- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

MERIDIAN PRODUCTS
124 EARLAND DRIVE
NEW HOLLAND PA 17557

4. Article Number
P071550448

Service:
tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X Cindy Butzer

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

LANCASTER PA 176 05/24/93 DCR #1B

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

LANCASTER PA 176
PM
24 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

METAL FINISHING TECH.
60 WOOSTER COURT
FORESTVILLE CT 06010

4. Article Number

P071550447

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

tered
ied
ss Mail

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Steve Gudaitis

7. Date of Delivery

MAY 24 1993

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

HARTFORD, CT
PM
24 MAY
1993
190

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

METALADE, INC. (PS)
39 COMMERCE DR
ROCHESTER NY 14623

4: Article Number

P071550446

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

ered
ed
ss Mail

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

ROCK T-R NY
MAY
25
1993
146

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

IGAN LIMESTONE
GALCITE RD
RS CITY MI 49779

4. Article Number
P071 550 444

Type of Service:
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X [illegible] (Security)

7. Date of Delivery
5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

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- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

MI
10
RO

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

HIGAN MAPLE BLOCK CO
BOX 245 STANDISH AVE
OSKY MI 49770

4. Article Number
P071 550 443

Type of Service:
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X Jack C Grubaugh

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

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- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL®

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

OSS DIV OF PIERCE CO.
SHERWOOD AVE
INGDALE NY 11735

4. Article Number
P071 550 442

Type of Service:
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X 5/24/94

6. Signature — Agent
X

7. Date of Delivery
MAY 24 1993

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

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U.S.MAIL®

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

IL OIL CORP.
5/HIGHBRIDGE ROAD
ETVILLE NY 13066

4. Article Number
P071 550 439

Type of Service:
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X Dawn Elwin

6. Signature — Agent
X David J Nelson

7. Date of Delivery
5/22/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

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- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

SYRACUSE, NY 132
5 PM
22 MAY
1993

DEFEAT
MUSCULAR DYSTROPHY
SUPPORT MDA

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

GOMERY WIRE CO.
LETON INDUSTRIAL PK
LETON NH 03501

4. Article Number
P071 550 436

Type of Service:
- ☐ Registered
- ☐ Insured
- ☐ Certified
- ☐ COD
- ☐ Express Mail
- ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X Stanley R. Groupe

7. Date of Delivery
5/28/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

JCT VT 05001 05/25/93 DCR3

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

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- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

MEDICAL DISPOSAL SERVICES
899 FERN HILL RD
WEST CHESTER PA 19380

4. Article Number

P071550453

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee ...and DATE DELIVERED.

5. Signature — Addressee

X Maria Borrett

6. Signature — Agent

X

7. Date of Delivery

5-27-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

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- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

NAL SEA PRODUCTS
NER AVE
MOUTH NH 03801

4. Article Number
P071 550 426

Type of Service:
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery
5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL®

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

RE'S BOUNTY INC.
DRVILLE DR
MIA NY 11716

4. Article Number
P071 550 424

Type of Service:
- ☐ Registered
- ☐ Insured
- ☐ Certified
- ☐ COD
- ☐ Express Mail
- ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery
5-11-93

8. Addressee's Address *(ONLY if requested and fee paid)*

3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

LONG ISLAND, NY 117
PM
21 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S. MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

Is your RETURN Address printed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

NIAGARA CUTTER SERVICE CENTER
P.O. BOX 279
REYNOLDSVILLE PA 15851

4a. Article Number

P 353 158 200

4b. Service Type

- ☐ Registered
- ☐ Certified
- ☐ Express Mail
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

7. Date of Delivery

5-20-93 JCS

5. Signature (Addressee)

6. Signature (Agent)

X Peggy Zorlman

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

Is your RETURN Address printed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

NIAGARA DEVELOPMENT & MFG. CO
3315 HASLEY DRIVE
NIAGARA FALLS NY 14304

4a. Article Number
P353 158 201

Service Type
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Date of Delivery
5/20/93

5. Signature (Addressee)
Dawn Wagner

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

PS Form **3811**, December 1991 ☆U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business

BUFFALO, NY 142
PM
21 MAY
1993

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

RA TRANSFORMER CORP.
DALE RD/PO BOX 233
LO NY 14225

4. Article Number

P071 550 421

Type of Service:

- ☐ Registered
- ☐ Certified
- ☐ Express Mail
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X F Daly

6. Signature — Agent

X

7. Date of Delivery

A7

8. Addressee's Address (ONLY if requested and fee paid)

BUFFALO, NY CHEEKTOWAGA BR. MAY 24 1993 USPS

1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

PAUL B. ZIMMERMAN
295 WOODCORNER RD
LITITZ PA 17543

4. Article Number
P071550398

Service:
ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X Lemard M. Oberholtzer

6. Signature — Agent
X

7. Date of Delivery
5/23/83

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

LANCASTER, PA (176) 05/22/93 DCR #18

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

LANCASTER, PA 176
PM
MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

SHORE LABS INC.
X 568, 4044 ENDICOTT STRE
DY MA 01960

4. Article Number
P071 550 419

Type of Service:
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 wh[illegible] ad[illegible]itional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Spac[illegible] on the reverse side. Failure to do this will prevent this card from being returned to you. The return recei[illegible]ee will provide you the name of the person delivered to and the date of delivery. For additional fees the [illegible]llowing services are available. Consult postmaster for fees and check box(es) for additional service(s) [illegible]equested.

1. ☐ Show to whom delivered, date, [illegible]d addressee's address. *(Extra charg[illegible])*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

PASSAIC ENGRAVING CO., INC
41 BROOK AVE
PASSAIC NJ 07055

4. Article Number

P071550399

[illegible]ervice:

[illegible]red ☐ Insured
[illegible]d ☐ COD
Mail ☐ Return Receipt for Merchandise

[illegible]ain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

MAY 24 1993

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

PAUL B. ZIMMERMAN
295 WOODCORNER RD
LITITZ PA 17543

4. Article Number
P071550398

Service:
ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X Leonard M. Oberholtzer

6. Signature — Agent
X

7. Date of Delivery
5/23/83

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

LANCASTER PA (175) 05/22/93 DCR #18

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

LANCASTER, PA 176
PM
MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

1 MAIN

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

PEASE A.F.B.
BLDG 93
PEASE AIR FORCE B NH 03803

4. Article Number

P071550397

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

tain signature of addressee and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X RC

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

PORTSMOUTH, NH 038
PM
24 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

PEERLESS WINSMITH, INC
172 EATON ST
SPRINGVILLE NY 14141

4. Article Number

P017550396

Service:

tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

F6

btain signature of addressee
and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Ann L Bagley

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

BUFFALO NY 142
PM
24 MAY
1993

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

PENN TANK
237 MC ALEES RD
SEWICKLEY PA 15143

4. Article Number

P071550395

Service:

ered
ed
s Mail

☐ Insured
☐ COD
☐ Return Receipt for Merchandise

otain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X B. Brunner

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

PITTSBURGH PA
PM
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

PENNSYLVANIA PRESSED METALS,
P.O. BOX 271
EMPORIUM PA 15834

4a. Article Number
P 353 158 203

4b. Service Type
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
5/20/93

5. Signature (Addressee)
Charles Foley

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

PS Form **3811**, December 1991 ☆U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and ~~complete items~~ 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

PERRIOGRAPHICS
21800 DORAL RD
WAUKESHA WI 53186

4. Article Number

P071550394

Service

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

tered
fied
ss Mail

btain signature of addressee
and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Maryanne Noble

7. Date of Delivery

5/24/83

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

PETROLEUM FUEL & TERMI
54 RIVERSIDE AVE
RENSSELAER NY 12144

4. Article Number

P071550393

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee ...and DATE DELIVERED.

5. Signature — Addressee

X Loyal Newell

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

PHIL'S SERVICE STATION
RT 9 WEST & WILLOW RD
CORNWALL NY 12518

4. Article Number

P071550392

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-22-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

MF MID-HUDSON
PM
2 1
1993

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

PHILADELPHIA RESINS
13 COMMERCE DRIVE
MONTGOMERYVILLE PA 18936

4. Article Number

P071550391

Service:

- stered ☐ Insured
- fied ☐ COD
- ess Mail ☐ Return Receipt for Merchandise

obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X John Lyons

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

MONTGOMERYVILLE, PA 18936
MAY 26 1993
USPS

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

PIONEER PLASTICS
ONE PRONITE RD
AUBURN ME 04211

4. Article Number
P071550390

Service:
ered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X John Bryant

6. Signature — Agent
X

7. Date of Delivery
5/24/93 M. Hickey

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S. MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

PLAINVILLE ELECTROPLATING CO
21 FORESTVILLE AVE
PLAINVILLE CT 06062

4. Article Number

P071550389

Service:

tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Robert Wallaire

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

THE PLASTEK GROUP
2310 PITTSBURGH AVE
ERIE PA 16502

4. Article Number
P071550090

Service:
☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X James Gerstenberger

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

ERIE, PA 165
PM
25 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

PLATING FOR ELECTRONICS INC
94 CALVARY ST
WALTHAM MA 02254

4. Article Number

P071550387

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Cheryl Stascavage

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

WALTHAM MA
MAY 25 1993

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

3 BOSTON, MA. 02205 05/25/93 PM

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

BOSTON, MA 021
PM
25 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

PLASTIGLIDE MFG. CORP
105 PROGRESS LANE
WATERBURY CT 06705

4. Article Number

P071550388

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

ered
ed
ss Mail

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/25

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

T. PRODUCTS
ENTRAL STREET
OR ME 04401

4. Article Number
P071 550 403

Type of Service:
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X Sue Coolbrith

6. Signature — Agent
X

7. Date of Delivery
MAY 24 1993

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

PLY GEMS
701 NORTH BROADWAY
GLOUCESTER CITY NJ 08030

4. Article Number

P071550386

Service:

ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt for Merchandise

otain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Ted Dastiel

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

TION SOLUTIONS
D
STON VT 05495

4. Article Number
P071 550 385

Type of Service:
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

Is your RETURN ADd on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

PRINCE RUBBER & PLASTIC CO.
137 ARTHUR STREET
BUFFALO NY 14207

4a. Article Number

P353 158 204

rvice Type

istered ☐ Insured

tified ☐ COD

ress Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

5/20

5. Signature (Addressee)

John Gustomin

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

PS Form **3811**, December 1991 ☆U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business

BUFFALO, NY 142
PM
21 MAY
1993

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ECTIVE CLOSURES CO, INC
ELMWOOD AVE
ALO NY 14207

4. Article Number
P071 550 375

Type of Service:
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery
5-24

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

BUFFALO, NY 142
PM
24 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S. MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

ed on the reverse side?

s your RETURN AD

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

PURE CARBON CO.
EAST SECOND STREET
COUDERSPORT PA 16915

4a. Article Number

P353 158 206

ervice Type

gistered ☐ Insured

rtified ☐ COD

press Mail ☐ Return Receipt for Merchandise

ate of Delivery

5-20-93

5. Signature (Addressee)

6. Signature (Agent)

Chas Ludwig

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1991 ★U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business

WILLIAMSPORT, PA
20 MAY
1995

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

Is your RETURN ADDRESS completed on the reverse side?

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

PUROLATOR PRODUCTS
3 MIRACLE MILE
ELMIRA NY 14903

4. Article Number
P071 550 374

Type of Service:
- ☐ Registered
- ☑ Certified
- ☐ Express Mail
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X Ken M Ewen

7. Date of Delivery
MAY 25 1993

8. Addressee's Address (ONLY if requested and fee paid)

ELMIRA REGISTRY DIV., N.Y.
MAY 25 1993
USPS

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

R.E. CHAPIN MANUFACTURING
700 ELLICOTT ST./PO 549
BATAVIA NY 14020

4. Article Number

P071550043

Service:

tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X 5/24/93

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

BUFFALO, NY 142
PM
24 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

RALSTON PURINA
3800 MIDDLE RD
DUNKIRK NY 14048

4. Article Number

P071550044

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Vincent C. Zach City Cab

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

RAMAPO-CATSKILL LIBRARY SYSTEM
619 NORTH ST
MIDDLETOWN NY 10940

4. Article Number
P071550045

Service:
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Mail

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery
1-24

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

Is your RETURN Address Printed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

RANCO INDUSTRIES
600 SINCLAIR BLVD
SINCLAIRVILLE NY 14782

4a. Article Number

P 353 158 208

4b. Service Type

☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)

X

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

PS Form **3811**, December 1991 ★U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

READING REHAB. HOSPITAL
RD 1 BOX 250
READING PA 19607

4. Article Number

P071550046

Service:

- ☐ Registered
- ☐ Certified
- ☐ Express Mail
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

8. Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5 22 93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

LANCASTER, PA (17) 05/22/93 DCR #1B

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

LANCASTER PA 176
PM
22 MAY
1993

SM

The United Way

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

REALTY ENGINEERING CO.
56 BLOOMFIELD AVE. PO BOX 622
PINEBROOK NJ 07058

4. Article Number

P071550047

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...ered
...ed
...ss Mail

...btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PINE BROOK NJ 07058 MAY 21 1993 USPS

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

Is your RETURN A[illegible]ed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

REDCOM LABORATORIES, INC
1 REDCCOM CENTER
VICTOR NY 14564

4a. Article Number

P353 158 209

[illegible]ervice Type

[illegible]gistered ☐ Insured

[illegible]rtified ☐ COD

[illegible]press Mail ☐ Return Receipt for Merchandise

[illegible]te of Delivery

5.21.93

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

[illegible]

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

RELIABLE METAL FINISHING
3204 16TH STREET
ZION IL 60099

4. Article Number

P71550048

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tered
...ied
...ss Mail

...btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL®

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

REMLEY & COMPANY
3816 OAK ORCHARD RD
ALBION NY 14411

4. Article Number

P740715500 49

Services

tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Dick Remley

6. Signature — Agent

X

7. Date of Delivery

5/22/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

RENNS SERVICE STATION
18 MECHANIC ST
AKRON NY 14001

4. Article Number
P071550050

Service:
stered ☐ Insured
fied ☐ COD
ess Mail ☐ Return Receipt for Merchandise

obtain signature of addressee or agent and DATE DELIVERED 3

5. Signature — Addressee
X Dan Earley

6. Signature — Agent
X

7. Date of Delivery
5-22-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

BUFFALO, NY 142
PM
MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

RENOLD INC.
BOURNE ST
WESTFIELD NY 14787

4. Article Number

P071550051

Service:

ered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/22/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

RETAIL PRINTING CORP
50 JOHN HANCOCK RD
TAUNTON MA 02780

4. Article Number

P071550052

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

tain signature of addressee
and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Joyce Eugenio

7. Date of Delivery

5/24

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

PROU RT *02904* PM 05/24/93 19:31 #14

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

RIVERDALE COLOR
153 CLASSEN AVENUE
BROOKLYN NY 11205

4. Article Number

P071550053

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Jacqueline Rivera

6. Signature — Agent

X

7. Date of Delivery

5-25

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

BROOKLYN NY 11256
PM
112
26 MAY
1993

BKLYN NY 11256 18:03 05/26/93 BCK#7

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ROBERT BOND BUILDERS
CROOKED RD/PO BOX 155
HULLS COVE ME 04644

4. Article Number
P071550054

Service:
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery 5-22-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE
05/22/93 BANGOR, ME 04401-2 MLDER-B 19:26
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

MAY 22 PM 1993

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees check box(es) for additional service(s) requested.

☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*

2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ROBOTRON
21300 W. 8 MILE RD
SOUTHFIELD MI 48086

4. Article Number

P071550056

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...ered
...ed
...ss Mail

...btain signature of addressee
...and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

MAY 24 1993

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

RTI
65 NEWCOMB ST
ATTLEBORO MA 02703

4. Article Number

P071550057

Service:

tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

Addressee's Address *(ONLY if requested and fee paid)*

6. Signature — Agent

X L. Gabrielle

7. Date of Delivery

ATTLEBORO MA 02703 MAY 17 1993 USPS

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

PRON RI *029043 PM 05/24/93 18:04 #14

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL®

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

RYDER TRUCK RENTAL
107 ANDERSON RD
CHEEKTOWAGA NY

4. Article Number

P071550058

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee ...gent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/6/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

BUFFALO, NY 142
PM
24 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

SAEGERTOWN MFG. CORP.
CRAWFORD STREET
SAEGERTOWN PA 16335

16433

4. Article Number

P071550060

Service:

- ...ered ☐ Insured
- ...d ☐ COD
- ...s Mail ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Thrés Kaelin

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

SAEGERTOWN PA
MAY 24 1993
USPS

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

SCANSFORMS, INC.
181 RITTENHOUSE CIRCLE
BRISTOL PA 19007

4. Article Number

P071550061

Service:

ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt
☐ for Merchandise

Signature of addressee or agent and DATE DELIVERED

5. Signature — Addressee

X

6. Signature — Agent

X A. Bennett

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

BRISTOL, PA 19007
MAY 24 1993
USPS

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

PHILADELPHIA, PA 191
PM
24 MAY
1993

Giant Proportions —
Collect Stamps!

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

SCHWEIZER AIRCRAFT CORP
1250 SCHWEIZER RD
BIG FLATS NY 14814

Article Number
P071550064

Service:
- ☐ Registered
- ☐ Insured
- ☐ Certified
- ☐ COD
- ☐ Express Mail
- ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X Marvin Chamberlain

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

SCRANTON SEWER AUTHORITY
307 N.WASHINGTON AVE
SCRANTON PA 18503

4. Article Number

P071550065

Service:

stered ☐ Insured
fied ☐ COD
ess Mail ☐ Return Receipt for Merchandise

obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X David O'Neill

7. Date of Delivery

MAY 24 1993

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete Items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

SEBAGO, INC
MECHANIC STREET
WESTBROOK ME 04092

4. Article Number

P071550066

Service:

- ered ☐ Insured
- ed ☐ COD
- s Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

WESTBROOK, ME MAY 2 1989 U.S.

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

PORTLAND, ME 041
PM
24 MAY
1993

Begin an Adventure of Giant Proportions — Collect Stamps!

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

SELECT-TRON INDUSTRIES
1946 E. 12TH ST.
ERIE PA 16511

4. Article Number

P071550067

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

ered
ed
ss Mail

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

TATES POSTAL SERVICE

FICIAL BUSINESS

DER INSTRUCTIONS
ame, address and ZIP Code
e below.
e items 1, 2, 3, and 4 on the

o front of article if space
otherwise affix to back of

article "Return Receipt
d" adjacent to number.

U.S.

PENALTY F
USE

Print Sender's name, address, and ZIP Code in the space

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

SERONOBAKER DIAGNOSTIC
100 CASCADE DRIVE
ALLENTOWN PA 18102

4. Article Number

P071550068

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

MAY 24 1993

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

LEHIGH PM 24 MAY 1993

LVPDC 180 05/24/93

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

RD NILES, INC
ORTH GENESSEE STREET
UR FALLS NY 14865

4. Article Number
P071 550 009

Type of Service:
- ☐ Registered
- ☑ Certified
- ☐ Express Mail
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X Liz Personius

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

MONTOUR FALLS, NY
MAY 24 AM 1993
14865

U.S. MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

Is your RETURN ADD on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

SHURLINE MFG. CO., INC
80 WEST DRULLARD AVENUE
LANCASTER NY 14086

icle Number
P353 158 210

vice Type
stered ☐ Insured
fied ☐ COD
ess Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
5-21-93

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

PS Form 3811, December 1991 ★U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business

BUFFALO, NY
PM
21 MAY
1993

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S.MAIL

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: MS. SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ARVEY'S
AST MINEOLA AVENUE
Y STREAM NY 11580

4. Article Number

P071 550 070

Type of Service:

☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

USPS VALLEY STREAM, NY 11580-9998 MAY 24 1993

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

PUMP
NDUSTRIAL BLVD/PO BOX 460
ISLAND NY 14072

4. Article Number
P071 550 072

Type of Service:
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X Karen Kenney

7. Date of Delivery
5/24/93 ml

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

BUFFALO, NY 142
PM
24 MAY
1993

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

SONOCO FIBRE DRUM (B)
720 LAUREL ST
READING PA 19602

4. Article Number

P071550076

Service:

- tered ☐ Insured
- ied ☐ COD
- ss Mail ☐ Return Receipt for Merchandise

...obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

READING, PA
PM
24 MAY
1993
3B
196

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

S.E. MORRIS COUNTY MUNI
101 WESTERN AVE.
MORRISTOWN NJ 07960

4. Article Number

P071550059

Service:

tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/20 MAY 21 1999

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278
ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

SPECIALIZED PLATING
15 WARD HILL AVENUE
HAVERHILL MA 01835

4. Article Number

P071550078

Service:

- ☐ Registered
- ☐ Insured
- ☐ Certified
- ☐ COD
- ☐ Express Mail
- ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

MIDDLESEX-ESSEX
02 M/E 01888 MA 05/25/93 PM
25 MAY 1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

ST. JOHNSBURY TRUCKING
442 HOLLYWOOD AVE
S.PLAINFIELD NJ 07080

4. Article Number

P071550079

Service:

tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Paula Alexander

6. Signature — Agent

X

7. Date of Delivery

CS 5/21/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

Is your RETURN ADDRESS on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

ST. MARY'S METAL FINISHING
TROUT RUN ROAD
ST. MARY'S PA 15057

4a. Article Number
P353 158 021

4b. Service Type
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Charlie Ott
5. Signature (Addressee)

6. Signature (Agent)

7. Date of Delivery
5-20-93

8. Addressee's Address (Only if requested and fee is paid)

PS Form **3811**, December 1991 ☆U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

STATURE MACHINE TECHNO
23647 RYAN ROAD
WARREN MI 48091

4. Article Number

P071550080

Service:

ered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X [signature]

6. Signature — Agent

X

7. Date of Delivery

5-22-93 [signature]

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete Items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL®

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

EFINING AND MARKET (B)
RIVER RD
ANDA NY 14150

4. Article Number

P071 550 091

Type of Service:

☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5.22.93

SANBORN NY 14132 MAY 24 1993 PM

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

THERMATRU CORP.
108 MUTZFELD RD
BUTLER IN 46721

4. Article Number

P071550092

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

DLP 5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Thomas Hayes, Esq.
Commandant (G-LCL)
United States Coast Guard
2100 2nd Street, S.W.
Washington, DC 20593-0001

4a. Article Number
P 752 210 252

4b. Service Type
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
APR 19 1994

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)
CWO B.L. ZELNER, G-CAS-2, 267-0051

PS Form 3811, December 1991 ☆ U.S.G.P.O.: 1992-307-530 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

APR 2 6 1994

Print your name, address and ZIP Code here

U.S. ENVIRONMENTAL PROTECTION AGENCY
REGION II
OFFICE OF REGIONAL COUNSEL
NEW YORK/CARIBBEAN SUPERFUND BRANCH
26 FEDERAL PLAZA — ROOM 437
NEW YORK, NEW YORK 10278

EKLOSEL

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

THREE DIMENSIONAL CORP
ONE SOUTHSIDE RD.
DANVERS MA 02176

4. Article Number

P071550093

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Lee Beaulieu

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

TIBBETS INDUSTRY
30 COLCORD AVE
CAMDEN ME 048••

4. Article Number

P071550095

Service:

tered ☐ Insured
ied ☐ COD
ss ☐ Return Receipt for Merchandise

obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X G. Wood

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

PORTLAND, ME 041
PM
24 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

Splash

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

TIGHE BOND CORPORATION (PS)
53 S. HAMPTON RD
WESTFIELD MA 01085

4. Article Number
P071550097

Service:
☐ Insured
☐ COD
☐ Return Receipt for Merchandise

...tered
...fied
...ss Mail

...btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery
5/04/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

D11 SPFLD MA 19:43 05/24/93 DCR #3

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

TIVOLY,U.S.A.
BAXTER AVE.
DERBY LINE VT 05830

4. Article Number

P071550098

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-22-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

WHITE RIVER JCT VT 05001 05/22/93 DCR2

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

DERBY LINE, VT
MAY
22
PM
1993
05830

U.S. MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

TNT & ASSOCIATES
840 REYNOLDS AVE
COLUMBUS OH 43201

4. Article Number

P071550100

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

NEW YORK NY 100 05/27/93 03:49 PM

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

TODCO CORP
RTE 353
CATTARAUGUS NY 14719

4. Article Number

P071550101

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

tered
fied
ss Mail

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Barbara Long

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

TOWN OF N.TONAWANDA
758 ERIE AVENUE
N.TONAWANDA NY 14120

4. Article Number
P071550103

Service:
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee
...and DATE DELIVERED.

5. Signature — Addressee
X Mike Donovan

6. Signature — Agent
X

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

BUFFALO, NY 142
PM
24 MAY
1993

ALWAYS
USE ZIP CODE

U.S.MAIL

PENALTY FOR PRIVATE
USE, $300

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

TRANS TECH ELECTRONICS
E. WILLIAMS ST
WYOMING IL 61491

4. Article Number

P071550104

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

ered
ed
ss Mail

btain signature of addressee
and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

TRENCH COMPANY, INC.
1298 MAIN ST
BUFFALO NY 14201

4. Article Number

P071550106

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...ain signature of addressee ...and DATE DELIVERED.

5. Signature — Addressee

X Morris Hunter

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

TRI CAN SYSTEMS
12828 S. RIDGEWAY AVE
ALSIP IL 60658

4. Article Number

P071550108

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

ered
ed
ss Mail

otain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

TRICO PRODUCTS
817 WASHINGTON STREET
BUFFALO NY 142

4. Article Number

P071550109

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tered
...ied
...ss Mail

...obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X S. M. Haynes

6. Signature — Agent

X

7. Date of Delivery

MAY 25 1993

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

TrifAri
RI KRUSSMAN EISCHEL, INC
PAWTUCKET AVENUE
VIDENCE RI 02915

TRIFA
3400
E.PRO

4. Article Number
P071 550 112

Type of Service:
- ☐ Registered
- ☐ Insured
- ☐ Certified
- ☐ COD
- ☐ Express Mail
- ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

PROVIDENCE, RI 029
PM
27 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

Is your RETURN Address on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

TROPEL, INC.
60 O'CONNOR ROAD
FAIRPORT NY 14450

4a. Article Number
P353 158 213

4b. Service Type
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
5-20-93

5. Signature (Addressee)

6. Signature (Agent)
N. Carol Thomas

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1991 ★U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

ROC NY 146 21 17 05/20/93 #2

ROCHESTER, NY 146
P
MAY
19

Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: MS. SUZANNE BECKER

Is your RETURN ADDRESS on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

UTICA METAL PRODUCTS, INC.
1526 LINCOLN AVENUE
UTICA NY 13502

icle Number
P353 158 217

vice Type
stered ☐ Insured
ified ☐ COD
ress Mail ☐ Return Receipt for Merchandise

5. Signature (Addressee)

6. Signature (Agent)

7. Date of Delivery 5/20/93

8. Addressee's Address (Only if requested and fee is paid)

PS Form **3811**, December 1991 ☆U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

Is your RETURN ADDRESS on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

VAL-KRO, INC.
369 RIVER ROAD
N. TONAWANDA NY 14120

4a. Article Number
P353 158 214

4b. Service Type
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery.
5-8

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)
Kathleen A. Reitz

PS Form 3811, December 1991 ★U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business

BUFFALO, NY 142
PM
20 MAY
1993

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

VIBROPLATING
353 CANAL DR
BENSALEM PA 19020

4. Article Number

P071550115

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...stered
...fied
...ess Mail

...obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Paul M Brady

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

NEW YORK NY 100 05/27/93 03:20 DCB#8

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

TURBODYNE DIVISION
DRES IND 37 COATS STREET
WELLSVILLE NY 14895

4a. Article Number

P353 158 218

Service Type

☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Date of Delivery

5/20/93

5. Signature (Addressee)

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE FLMIRA N.Y. 149 05/20/93 16:53

Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: MS. SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

GENERAL SERVICES (PS)
STATE ST
HESTER NY 14614

4. Article Number
P071 550 116

Type of Service:
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X Dese' J. Ellis

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

VILLAGE OF WESTFIELD
42 ENGLISH ST
WESTFIELD NY 14787

4. Article Number
P071550117

Service:
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X Village of Westfield

6. Signature — Agent
X Marlene L. Robins

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

Is your RETURN ADd on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

W.R CASE & SONS CUTLERY CO
OWENS WAY (S. BRADFORD)
BRADFORD PA 16701

4a. Article Number

P 353 158 215

4b. Service Type

☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

BRADFORD MAY 20 1993 PA

5. Signature (Addressee)

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business

DUBOIS, PA 15801
PM
20 MAY
1993

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

WALLENPACK N. ELEM SCHOOL
HO6, BOX 6070
HAWLEY PA 18428

4. Article Number
P071550120

Service:
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X Ann M. Pretchon

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SCRANTON PA 185 #1 MAR 24 '93

HAWLEY PA
PM
1993
18428

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

WATERVLIET ARSENAL
SARWV-EHQ
WATERVLIET NY 12189

4. Article Number

P071550121

Service:

tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Arsenal

6. Signature — Agent

X B Pierce

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

WCA HOSPITAL
207 FOOTE AVE
JAMESTOWN NY 14701

4. Article Number

P071550122

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

MAY 22 1993

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

WEBASTO SUNROOF, INC.
2700 PRODUCT DRIVE
ROCHESTER HILLS MI 48367

Article Number
P071550125

Service:
- ☐ Registered
- ☐ Insured
- ☐ Certified
- ☐ COD
- ☐ Express Mail
- ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X Christine Dora

7. Date of Delivery 5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

ROCHESTER, MI
MAY 24
1993
USPO

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

ROYAL OAK, MI 480
P.M
24 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

WESTBORO FIELD HDQTRS (PS)
ROUTE 135
WESTBORO MA 01581

4. Article Number

P071550127

Service:

stered ☐ Insured
fied ☐ COD
ess Mail ☐ Return Receipt for Merchandise

obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X P. McNamara

7. Date of Delivery

5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

03/24/93 22:40 DCN#1 NOR MA 01613

WORCESTER, MA 01616
24 MAY
1993

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

WESTERN MAINE GRAPHICS
1 MADISON AVE.,PO BOX 153
NORWAY ME 04268

4. Article Number
P071550128

Service:
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X Robert M Bonan

7. Date of Delivery
5/24/93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

PORTLAND, ME 041
PM
24 MAY
1993

Splash

U.S.MAIL

PENALTY FOR PRIVA
USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

WESTINGHOUSE ELECTRIC CORP
RTS 30 &31
BEDFORD PA 15522

4. Article Number
P071550130

Service:
tered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X Edna Smith

7. Date of Delivery
5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

JOHNSTOWN, PA
PM
24 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

WEYERHAUSER CO.
100 HAWKES STREET
WESTBROOK ME 04092

4. Article Number

P071550131

Service:
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

ered
ed
s Mail

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

MAY 24 1993 WESTBROOK, ME

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

WILKESBARRE CITIZENS
75 N.WASHINGTON ST
WILKESBARRE PA 18711

4. Article Number

P071550134

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee ...and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

MAY 24 1988

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

WILSON GREATBATCH LTD
10,000 WEHRLE DRIVE
CLARENCE NY 14031

4. Article Number

P071550135

Service:

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

WOLF PRINTING
310 NEWINGTON RD
W.HARTFORD CT 06110

4. Article Number
P071550139

Service:
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

...ays obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

HARTFORD, CT 28 PM 1 AV 1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL®

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

XERXES CORPORATION
RTE 2, BOX 1060
WILLIAMSPORT MD 21795

4. Article Number
P071550140

Service:
ered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt for Merchandise

btain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X Jennifer L. Horn

6. Signature — Agent
X

7. Date of Delivery
5-25-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

YORK RAKES
PO BOX 488
UNADILLA NY 13849

4. Article Number

P071550142

Service:

tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt for Merchandise

obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Mark Rakes

7. Date of Delivery

5-24-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Apr. 1989 ★U.S.G.P.O. 1989-238-815 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

RETURN ADDRESS on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

ZIPPO MFG. CO.
CONGRESS STREET PLANT
BRADFORD PA 1670

4a. Article Number
P353 158 216

...rvice Type
...stered ☐ Insured
...ified ☐ COD
...ess Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

BRADFORD MAY 20 1993 PA

5. Signature (Addressee)

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

PS Form **3811**, December 1991 ☆U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK,NY 10278

ATTN: MS. SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

-LITE CO.,INC.
. ELMWOOD AVENUE
NER NY 14733

4. Article Number
P071 550 113

Type of Service:
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X Ann Kanouff

7. Date of Delivery
5-23-93

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

BUFFALO, NY 142
PM
24 MAY
1993

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER