JOLT METER TO V.N.

499095

RECEIPT FOR INSURED MAIL DOMESTIC - INTERNATIONAL

ADDRESSED FOR DELIVERY AT

(Post Office, State and Country)	
11/1/1/1	
POSTAGE	\$182
INSURANCE COVERAGE	\$10000
INSURANCE FEE	40 \$
SPEC. HANDLING	¢
DOMES- TIC	¢
ONLY ADDRESSEE ONLY	¢
RETURN RECEIPT	R. H. H.
(Except to Canada)	¢
FRAGILE LIQUID	PERISHABLE
(FOSTMARK)	PATRON OVER
C 92 /C/	POSTMASTER

SENDER: Fill in name and address of addressee as shown on the package.

NAME

House No. and Street, Apt. No.; or Box or R.D. No. (In care of), State, and ZIP Code

COVERAGE—Postal insurance covers (1) the value of the article(s) at time of mailing, if lost or totally damaged, or (2) the cost of repairs. Coverage may not exceed the limit fixed for the insurance fee paid. Consult postmaster for details of insurance limits and coverage.

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FORM

FILING CLAIM—Bring this receipt or the wrapper of the parcel to any post office, station, or branch within one year from the date the parcel was mailed. Submit sales slips, receipted bills, if available, or repair estimates to substantiate your claim.