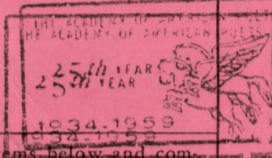
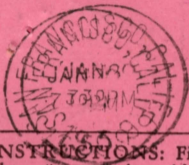


POST OFFICE DEPARTMENT  
OFFICIAL BUSINESS

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



POSTMARK OF  
DELIVERING OFFICE

INSTRUCTIONS: Fill in items below and complete #1 on other side, when applicable. Moisten gummed ends and attach to back of article. Print on front of article RETURN RECEIPT REQUESTED.

← RETURN  
TO

REGISTERED NO.

NAME OF SENDER T N TAKAHASHI

CERTIFIED NO.

STREET AND NO. OR P. O. BOX

INSURED NO.

CITY, ZONE AND STATE

51562

SAN FRANCISCO CALIF

C55-16-71549-4

POD Form 3811 Jan. 1958

# # 1-INSTRUCTIONS TO DELIVERING EMPLOYEE

Deliver *ONLY* to addressee

Show address where delivered

*(Additional charges required for these services)*

## RETURN RECEIPT

Received the numbered article described on other side.

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

SIGNATURE OF ADDRESSEE'S AGENT, IF ANY

DATE DELIVERED

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

1-29-58