P 074 976 604

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL
(See Reverse)

Sent to BARRY LOWER HOLNAM INC	
Street and AUXILIARY RT #3 6055 E CROYDON RD	
P.O., State and ZIP Code MORGAN UT 84050	
Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	$
Postmark or Date	

SALT LAKE CITY, UT MAIN OFFICE
OCT 2 - 1997
USPS - 84199

PS Form 3800, June 1985

DOGM JB M/029/001 & M/045/012 10/1/97

DOGM JB M/045/012 & M/029/001 10/1/97

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

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

3. Article Addressed to:
BARRY LOWER
HOLNAM INC
AUXILIARY RT #3
6055 E CROYDON RD
MORGAN UT 84050

4. Article Number
P 074 976 604

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
OCT 3 '97

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

PS Form 3811, Mar. 1988 ★ U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT