

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to: **13-F-00569**
Resent

Mr. Michael Morisy
MuRock News
Dept. MR 6058
PO Box 55819
Boston, MA 02205 - 5819

COMPLETE THIS SECTION ON DELIVERY

A. Signature *SAS* Agent
 Addressee

B. Received by (*Printed Name*) C. Date of Delivery

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

NOV - 4 2013

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (*Extra Fee*) Yes

Article Number
7012 2210 0001 6035 9034

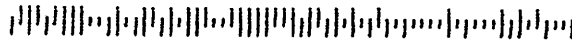
UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please

**US Consumer Product Safety Commission
Office of the Secretary
4330 East West Highway
Suite 820
Bethesda, MD 20814-4408**



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1. Article Addressed to: **13-F-00569**

Mr. Michael Morisy
 MuckRock News
 PO Box 55819
 DEPT MR 5516
 Boston, MA 02205 - 5819

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *JONES* Agent Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No



3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. **7010 1870 0003 4102 6640**

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• Sender: Please see  box •

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