

PS Form 3811, Mar. 1975

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

● SENDER: Complete items 1, 2, and 3.  
Add your address in the "RETURN TO" space on reverse.

1. The following service is requested (check one).
- Show to whom and date delivered..... 15¢
  - Show to whom, date, & address of delivery.. 35¢
  - RESTRICTED DELIVERY.  
Show to whom and date delivered..... 65¢
  - RESTRICTED DELIVERY.  
Show to whom, date, and address of delivery 85¢

2. ARTICLE ADDRESSED TO:  
 Mr. Klaus Gemming  
 49 Autumn Street  
 New Haven, Connecticut 06511

3. ARTICLE DESCRIPTION:

REGISTERED NO.	CERTIFIED NO.	INSURED NO.
	958145	

(Always obtain signature of addressee or agent)

I have received the article described above.  
 SIGNATURE  Addressee  Authorized agent

*X* *Milda M. Pritchard*

4. DATE OF DELIVERY *3/27/77* POSTMARK

5. ADDRESS (Complete only if requested)

6. UNABLE TO DELIVER BECAUSE: CLERK'S INITIALS

UNITED STATES POSTAL SERVICE  
OFFICIAL BUSINESS

**SENDER INSTRUCTIONS**

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

- Complete items 1, 2, and 3 on the reverse.
- Moisten gummed ends and 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 TO AVOID PAYMENT  
OF POSTAGE, \$300



**RETURN  
TO**



Inter American University Press

(Name of Sender)

G.P.O. Box 3255

(Street or P.O. Box)

San Juan, P. R. 00936

(City, State, and ZIP Code)