

1 of 1 9/6/2012 5:08 PM



ORIGIN (POSTAL SERVICE USE ONLY)					
PO ZIP Code	Day of Delivery				
94025	☐ Next ☐ 2nd ☐ 2nd Del. Day				
Date Accepted	Scheduled Date of Delivery	Return Receipt Fee			
Date Accepted 2	Month Day				
Mo. Day Year	Scheduled Time of Delivery	COD Fee	Insurance Fee		
Time Accepted AM	Noon 2 9 PM	\$	\$		
10-30	Military	Total Postage & Fees			
☐ PM Flat Rate ☐ or Weight	2nd Day 3rd Day	\$ 4695			
7 1	Int'l Alpha Country Code	Acceptance Emp. Initials			
lbs. ozs.		117			
FROM: (PLEASE PRINT) PHONE (50) 854 3393					
Lakshmi Arunachalam					
222 Stanford Avenue					
Menlo Park, CA 94025					

FOR PICKUP OR TRACKING

visit www.usps.com

Call 1-800-222-1811



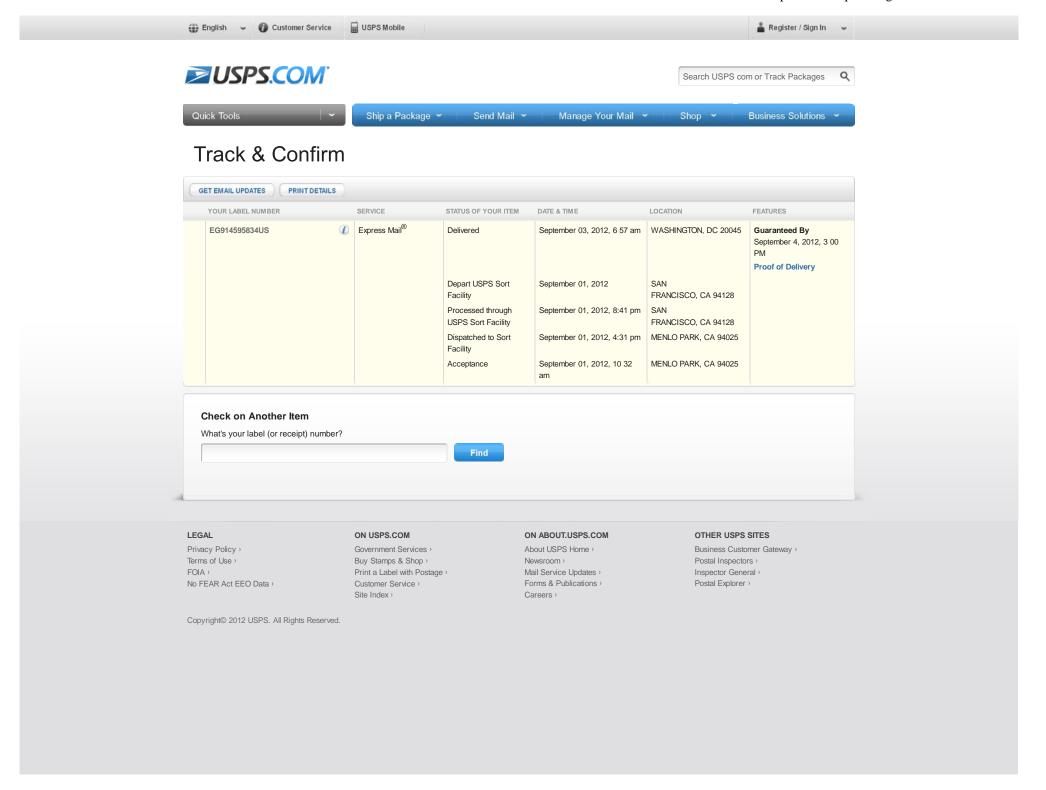
EXPRESS

UNITED STATES POSTAL SERVICE®

Customer Copy Label 11-B, March 2004

Post Office To Addressee

DELIVERY (POSTA	AL US	E ONLY)			
Delivery Attempt	Time	☐ AM	Employee Signature		
Mo. Day		□ РМ	(A)		
Delivery Attempt	Time	□ AM	Employee Signature		
Mo. Day		□рм	7		
Delivery Date	Time		Employee Somure		
Mo. Dav		□ PM	(2)		
CUSTOMER USE	ONL	Y			
PAYMENT BY ACCOUNT Express Mail Corporate Ar Federal Agency Acct. No. Postal Service Acct. No.		L Additional customer record wish delivery of addressee didges that art	DF SIGNATURE Domestic Mail Only) I merchandise insurance is void if juests waiver of signature. To be made without obtaining signature or addresses's agent (if delivery employee icle can be left in secure location) and I delivery employee's signature constitutes telivery.		
NO DELIVERY Weekend Holidi TO: (PLEASE PRINT)	PHON	Mailer Signatu	re		
Clerk U.S. Con	int	6	years forthe Federal		
717 Madison Place, N. W. Room					
Washi ZIP + 4 (U.S. ADDRESSES O	ng NIV DO	NOT USE FOR E	D. C. 401		
THE PROPERTY OF THE PROPERTY O					
1201430+1111					
FOR INTERNATIONAL DESTINATIONS, WRITE COUNTRY NAME BELOW.					
			1		



1 of 1 9/6/2012 5:11 PM



Scheduled Date of Delivery Return Receipt Fee

EG 714575834 US

Day of Delivery

ORIGIN (POSTAL SERVICE USE ONLY)

Date Accepted	Month Bay \$					
1 1/2	Month Day	7				
Mo. Day Year	Scheduled Time of Delivery	COD Fee	Insurance Fee			
Time Accepted	Noon 3 PM	\$	\$			
100	Military	Total Postag	je & Fees			
□ PM	2nd Day 3rd Day	\$ -10	245			
Flat Rate or Weight		4 1 27				
	Int'l Alpha Country Code	Acceptance	Emp. Initials			
lbs. ozs.	and the same of th					
FROM: (PLEASE PRINT) PHONE (650, 854 3393 Lakshmi Arunachalan 222 Stanford Avenue Meulo Park, CA 94025						
	<u> </u>	=1/7				

	EXPRESS		
	MAIL		
INITED STATI	ES POSTAL SERVICE®		

Customer Copy Label 11-B, March 2004

Post Office To Addressee

LEIVEN (1 CO.	- 00	Marie Land Street					The same of	1000
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elivery Attempt	Time	□ АМ	Employee Sign	ture			/	1
lo. Day		□ РМ		1	V 0-	711	M	
Delivery Date	Time	☐ AM	Employee Sign	ature	-	114-		
No. Day		□ РМ					mode and a fin	
CUSTOMER USE	ONL	Y						
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