

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. Addressee's Address

2. Restricted Delivery

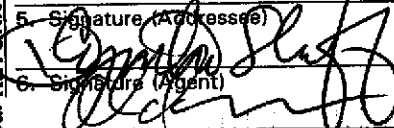
Consult postmaster for fee.


3. Article Addressed to: **ALCO MAZMAT**
94 JAN -5 #PB 3: 28 EC Rv III
 Moses Libitzky
 1475 Powell St., #201
 Emeryville CA 94608

4a. Article Number
 P 029 244 669

4b. Service Type
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

7. Date of Delivery
 1-4-94

5. Signature (Addressee)


6. Signature (Agent)


8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.

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2. Restricted Delivery

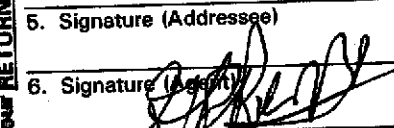
Consult postmaster for fee.

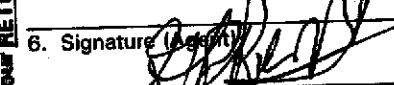
3. Article Addressed to: **(EC) #867 Rv III**
 Carolyn Ratliff
 3298 Sweet Dr.
 Lafayette, CA 94549

4a. Article Number
 P 113 815 153

4b. Service Type
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

7. Date of Delivery
 9-22-92

5. Signature (Addressee)


6. Signature (Agent)


8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business



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



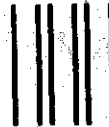
Print your name, address and ZIP Code here

ALAMEDA COUNTY
HEALTH CARE SERVICES AGENCY
HAZARDOUS MATERIALS DIVISION
80 SWAN WAY, ROOM 200
OAKLAND CA 94621



UNITED STATES POSTAL SERVICE

Official Business



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



92 SEP 23 AM 11:04

Print your name, address and ZIP Code here

DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION
80 SWAN WAY, SUITE 200
OAKLAND, CA 94621
430 - 4530

Is your RETURN ADDRESS completed on the reverse side?

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I also wish to receive the following services (for an extra fee):

1. Addressee's Address

2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to: #867 EC
R0111

Carolyn Ratliff
 3298 Sweet Drive
 Lafayette CA 94549

5. Signature (Addressee)
[Signature]

6. Signature (Agent)

4a. Article Number
 P 029 244 668

4b. Service Type
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

7. Date of Delivery
1.4.94

8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.

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I also wish to receive the following services (for an extra fee):

1. Addressee's Address

2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to: *E. CHU*
R0111

BOB TRENT *425*
 B J GEM INVESTMENT CO.
 9131 SAN LEANDRO ST., #220
 OAKLAND CA 94603

5. Signature (Addressee)
[Signature]

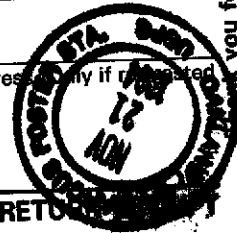
6. Signature (Agent)

4a. Article Number
 Z 773 036 384

4b. Service Type
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)



Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE



Official Business

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

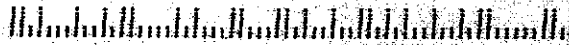


ALCO
HAZMAT

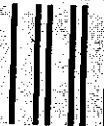
94 JAN -6 PM 2:22

Print your name, address and ZIP Code here

ALAMEDA COUNTY
HEALTH CARE SERVICES AGENCY
HAZARDOUS MATERIALS DIVISION
80 SWAN WAY, ROOM 200
OAKLAND CA 94621



UNITED STATES POSTAL SERVICE



Official Business

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



ALCO
HAZMAT

94 NOV 22 PM 2:31

Print your name, address and ZIP Code here

ALAMEDA COUNTY CC4580
DEPT. OF ENVIRONMENTAL HEALTH
ENVIRONMENTAL PROTECTION DIVISION
1131 HARBOR BAY PKWY., #250
ALAMEDA CA 94502-6577

Is your RETURN ADDRESS completed on the reverse side?

RECIPIENT:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
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- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1. Addressee's Address
- 2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
 92 OCT 22 5 12:04 (EC) #867
 Attn: John De Clercq
 T. A. Ei II
 500 12th Street, Suite 310
 Oakland CA 94607-4010
 20111

4a. Article Number
P 113 815 191

4b. Service Type
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

7. Date of Delivery
10/21/92

5. Signature (Addressee)

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service

UNITED STATES POSTAL SERVICE

Official Business



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



Print your name, address and ZIP Code here

DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION
80 SWAN WAY, SUITE 200
OAKLAND, CA 94621
430 - 4530