

RECEIPT FOR DOMESTIC INSURED PARCEL
(Not for International Mail)

ADDRESSED FOR DELIVERY AT (P.O., State & ZIP Code)	
POSTAGE	POSTMARK OF
INSURANCE FEE	
SPECIAL DELIVERY	
SPECIAL HANDLING	
TOTAL	
INSURANCE COVERAGE \$	MAILING OFFICE
<input type="checkbox"/> Fragile <input type="checkbox"/> Liquid <input type="checkbox"/> Perishable	
POSTMASTER (By)	
SENDER — Enter name and address of addressee on the reverse and read information regarding insurance coverage and claims.	

PS Form 3813, January 1991

SAVE THIS RECEIPT UNTIL PACKAGE IS ACCOUNTED FOR

COVERAGE — Postal insurance covers (1) the value of the article(s) at time of mailing, if lost or totally damaged, or (2) the cost of repairs. It does not cover spoilage of perishable items. Coverage may not exceed the limit fixed for the insurance fee paid. Consult postmaster for details of insurance limits and coverage.

FILING CLAIM — Indemnity claims must be filed within one year from the date the article was mailed. The original mailing receipt must be presented when filing a claim. Claims for complete or partial loss of contents, damage, or alleged rifling must be filed immediately. The article, container and packaging must be presented to file a claim for damage or loss of contents. Submit sales slips, receipts, bills, or repair estimates to substantiate your claim.

Enter below name and complete address of addressee. Show if addressed in care of person, hotel, etc.

SENT TO _____

(ZIP Code)

PS Form 3813, January 1991 (Reverse)

Attachment 3

***** WELCOME TO *****
L INFANT PAPA SIA
437 L INFANT PLAZA SW
WASHINGTON, DC 20026-4250
12/16/05 04:43PM

Transaction Number 95
USPS # 104978-9554

1. Priority Mail service .01
Destination: 39211
Weight: 0 lb. 11.60 oz
Affix. Post.: -6.04
Total Cost: 6.05
Base Rate: 3.85
Tracking #:
7303 3105 4900 0432 0163
SERVICES
\$69.00 insurance 2.20

Subtotal .01
Total Charged .01
DebitCard .01

<23-901890004-99>

DebitCard
ACCT. NUMBER TRANS # AUTH
7720 723 560101
RECEIPT # 007174

Thanks.

It's a pleasure to serve you.

ALL SALES FINAL ON STAMPS AND POSTAGE.
REFUNDS FOR GUARANTEED SERVICES ONLY.

VF 023 621 776 US

United States Postal Service®
INSURED MAIL
 DOMESTIC - INTERNATIONAL



VF 023 621 776 US

NOTE: To file a claim for damage or loss of contents, the article, container, and packaging must be presented.

VF 023 621 776 US

**U.S. Postal Service®
 INSURED MAIL RECEIPT**

OFFICIAL USE

Postage	\$	<input type="checkbox"/> Fragile <input type="checkbox"/> Liquid
Insurance Fee		<input type="checkbox"/> Perishable
Restricted Delivery Fee (Domestic only; endorsement required)		Insurance Coverage:
Special Handling Fee		Postmark Here
Return Receipt Fee (Except for Canada: endorsement required)		
Total Postage & Fees	\$	

Sent to:

Street, Apt. No., or PO Box No.

City, State, ZIP+4®, Country

PS Form 3813-P, May 2004

See Reverse for Instructions