



ER 312916716 US



UNITED STATES POSTAL SERVICE®

Post Office To Addressee



ORIGIN (POSTAL USE ONLY)

PO ZIP Code 90024	Day of Delivery <input checked="" type="checkbox"/> Next <input type="checkbox"/> Second <input type="checkbox"/>	Flat Rate Envelope <input type="checkbox"/>
Date In 11-3-03	<input type="checkbox"/> 1st Day <input checked="" type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Postage \$ 13.65
Time In 8:46	Military <input type="checkbox"/> 1st Day <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Return Receipt Fee <input type="checkbox"/>
Weight 2.1	Int'l Alpha Country Code	ODD Fee \$
Insurance Fee \$	Acceptance Clerk Initials MH	Total Postage & Fees \$ 13.65
No Delivery <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday		

DELIVERY (POSTAL USE ONLY)

Delivery Attempt	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Attempt	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Date	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	

CUSTOMER USE ONLY

PAYMENT BY ACCOUNT  
Express Mail Corporate Acct. No. \_\_\_\_\_

WAIVER OF SIGNATURE (Domestic Only)  
Additional merchandise insurance is void if waiver of signature is requested.  
I wish delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges that article can be left in secure location) and I authorize that delivery employee's signature constitutes valid proof of delivery.

NO DELIVERY  
 Weekend  Holiday

Customer Signature \_\_\_\_\_

FROM: (PLEASE PRINT)

PHONE ( ) \_\_\_\_\_

SERGEI V. BARANOV

TO: (PLEASE PRINT)

PHONE ( ) \_\_\_\_\_

FBI

Suite 1700  
11000 Wilshire Blvd  
Los Angeles, CA 90024

ZIP + 4

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FOR PICKUP OR TRACKING CALL 1-800-222-1811

www.usps.com



PRESS HARD. You are making 3 copies.



ER 629084961 US



UNITED STATES POSTAL SERVICE®

Post Office To Addressee

ORIGIN (POSTAL USE ONLY)

PO ZIP Code 90024	Day of Delivery <input type="checkbox"/> Next <input type="checkbox"/> Second <input type="checkbox"/>	Flat Rate Envelope <input type="checkbox"/>
Date In 11-7-03	<input type="checkbox"/> 1st Day <input checked="" type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Postage \$ 13.65
Time In 8:44	Military <input type="checkbox"/> 1st Day <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Return Receipt Fee <input type="checkbox"/>
Weight 2.1	Int'l Alpha Country Code	ODD Fee \$
Insurance Fee \$	Acceptance Clerk Initials MH	Total Postage & Fees \$ 13.65
No Delivery <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday		

DELIVERY (POSTAL USE ONLY)

Delivery Attempt	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Attempt	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Date	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	

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FBI Los Angeles Field Office  
11000 Wilshire Blvd,  
Suite 1700  
Los Angeles CA

ZIP + 4

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