Name and Address of Firm or Individual *(Include Apt./Suite No.)*

By *(Signature and title of person signing order)*

Telephone No.

The above-named firm or individual hereby authorizes representatives whose signatures appear below to receive unrestricted registered, certified, insured, c.o.d., express mail, and special delivery mail addressed to or in care of the above-named firm or individual until otherwise notified in writing, and assumes all responsibility for loss, rifling, or damage of said mail after proper delivery. All previous orders are hereby revoked. SPECIAL INSTRUCTIONS: Where RESTRICTED DELIVERY MAIL is to be included, the statement "This authorization is extended to include RESTRICTED DELIVERY MAIL" must be entered on the delivery order by the person signing it. This notation is to be made on the part of the form for signatures of authorized agent. NOTE: Unknown signatures must be identified.

Signature of Clerk Verifying Customer's Signature

Date

SIGNATURES OF AUTHORIZED AGENTS

PS Form 3801, Apr. 1983 **STANDING DELIVERY ORDER**