

For Post Office Use Only
ENTERED IN DIRECTORY

INITIALS OF CLERK

INITIALS OF CARRIER

BOX NO.

RS

30061

THE FOLLOWING MUST BE COMPLETED AND SIGNED BEFORE P.O. BOX IS ASSIGNED

DELIVER MAIL IN ACCORDANCE WITH INSTRUCTIONS CHECKED BELOW

ALL EXCEPT SPECIAL DELIVERY IN BOX

ALL INCLUDING SPECIAL DELIVERY IN BOX

ONLY MAIL ADDRESSED TO BOX IS TO BE PLACED IN IT. ALL OTHER MAIL TO BE DELIVERED AS ADDRESSED.

OTHER INSTRUCTIONS (Explain)

SPECIAL DELIVERY MAIL ONLY (Deliver as checked below)

DELIVER TO LOCAL RESIDENCE AT

DELIVER TO LOCAL BUSINESS ADDRESS AT

(No., street, and zone)

(No., street, and zone)

*Post Office
9-26-63*

JUN 11 1963
NEW ORLEANS

NAMES OF PERSONS ENTITLED TO RECEIVE MAIL THROUGH BOX (If box is rented to a firm, include the full name of each of its members whose mail is to be placed in box.)

*A. J. Hidell ↓↓↓↓
→ MARINA OSWALD
↑↑↑↑↑*

HAVE READ ITEMS 1 THROUGH 5, ABOVE AND WILL COMPLY WITH THEM.

X *L. H. Oswald*
(Signature of applicant)

POD FORM 1093
JULY 1960

APPLICATION FOR POST OFFICE BOX

U.S. GOVERNMENT PRINTING OFFICE 16-4747

FOR POST OFFICE USE ONLY

POSTMASTER

DATE BOX OPENED

DATE BOX CLOSED

BOX NO.

6-3-63

9-26-63

30061

APPLICANT PLEASE NOTE: Completion of this application signifies your willingness to comply with all postal rules relative to the renting and use of Post Office boxes.

NAME OF APPLICANT (Print or type)

L. H. Oswald

NAME OF FIRM OR CORPORATION (If box is rented for use of partner)

KIND OF BUSINESS

*Post Office
9-26-63
RS*

BUSINESS ADDRESS (No., street, and zone)

HOME ADDRESS (No., street, and zone)

657 French St.

New Orleans

SIGNATURE OF APPLICANT

X *L. H. Oswald*

DATE OF APPLICATION

June 3

CADIGAN EXHIBIT No. 22