

FROM _____

**FIRST CLASS
MAIL**

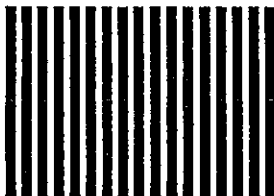
NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

POSTAGE DUE COMPUTED BY:
DELIVERY UNIT IF NO SPECIAL SERVICES

POSTAGE _____
MERCHANDISE RETURN FEE _____
TOTAL POSTAGE AND FEES DUE \$ _____

MERCHANDISE RETURN LABEL
PERMIT NO. 1
CRESTON, IA 50801
PRECISION OPTICAL
P.O. BOX 369

**POSTAGE DUE UNIT
US POSTAL SERVICE
CRESTON IA 50801-0369**



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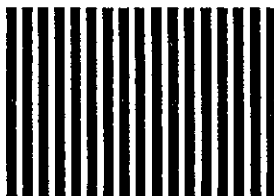
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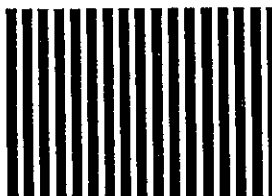
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