

# RECEIPT

719717

P.O. Box 287 Crittenden Station  
 ROCHESTER 7, NEW YORK

Administrative Assistant

To: \_\_\_\_\_

Re: Receipt of Material

Original to be signed personally by the recipient and returned to the sender.  
 Duplicate to be retained by the recipient.  
 Triplicate retained by sender for suspense file.

I have personally received from (sender) Dr. Samuel Bassett (Dr. Bale)

(sender's address) \_\_\_\_\_, the material as identified below. I assume full responsibility for the safe handling, storage, and transmittal elsewhere of this material in accordance with existing regulations. The material, including enclosures and attachments is identified as follows: (in identifying material avoid any reference which might cause the receipt form to be classified).

Description	Date of Document	From	Addressed to	Ref. or File No.	Date Mailed
Letter <b>xx</b>	5.13.46	Dr. Bassett	Dr. Langham	II-138-5767	by hand
Drawing _____					
Report _____					
Other _____ (Indicate)					
No. and Nature of copies: SO <u>1 CC 2-4 of 5A</u>					
PC _____ TC _____					
Other _____ (Number)					
Number of enclosures and attachments _____					

SO: signed original      CC: carbon copy      PC: photostat      TC: typed copy

Signature S.H. Glover

Date 5/14/46

Postal Registry No. \_\_\_\_\_

**PLEASE SIGN AND RETURN ORIGINAL RECEIPT IMMEDIATELY**

**RECEIPT**

1146788



PROVENANCE

REPOSITORY: OFFICE OF HUMAN RADIATION  
EXPERIMENTS (OHRE)

COLLECTION: PLUTONIUM INJECTION INVESTIGATION  
FILES (OHRE 1)

BOX: 4

FOLDER: IRRELEVANT MATERIAL

