

# RECEIPT

719739

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

To: Administrative Assistant

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. 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 <u>tele. call</u>	<u>10/5/45</u>	<u>Dr. Bale</u>	<u>Dr. Langham</u>	<u>II-130A</u>	<u>by hand</u>
Drawing _____					
Report _____					
Other _____ (Indicate)					
No. and Nature of copies:					
SO <u>1</u> CC <u>/</u>					
PC _____ TC _____					
Other _____ (Number)					
Number of enclosures and attachments _____					

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

Signature Susan McGowan (RMP)

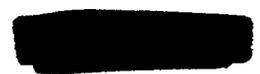
Date October 5, 1945

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

PLEASE SIGN AND RETURN ORIGINAL RECEIPT IMMEDIATELY

RECEIPT

1146825



PROVENANCE

REPOSITORY: OFFICE OF HUMAN RADIATION  
EXPERIMENTS (OHRE)

COLLECTION: PLUTONIUM INJECTION INVESTIGATION  
FILES (OHRE 1)

BOX: 4

FOLDER: IRRELEVANT MATERIAL

1146826 A



