

UNITED STATES POSTAL SERVICE



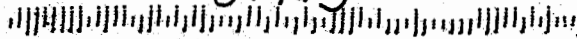
First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

U. S. NUCLEAR REGULATORY COMMISSION
SUITE 100
ATTN: DONNA M. GRUBER, DNMS, RI
2100 RENAISSANCE BOULEVARD
KING OF PRUSSIA, PA 19406

52-21175-01 03019882

CN 586763



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jose R. Arroyo
Radiation Safety Officer
Baxter Healthcare of Puerto Rico
P.O. Box 1389
Aibonito, PR 00705

2. Article Number
(Transfer from service label)

7003 2260 0005 1382 7293

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
[Handwritten Signature] Addressee

B. Received by (Printed Name) C. Date of Delivery
[Handwritten Name]

D. Is delivery address the same as item 1? Yes
If YES, enter delivery class below No

DEC 19 2016

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes