

5. BANK of NOVA SCOTIA

Att: Mr. Eric S. Sawyer, Manager  
Scotiabank  
The Bank of Nova Scotia  
P.O. Box N-7518  
Nassau, Bahamas

Sept. 2, 1977

Dear Mr. Sawyer,

I am writing in regard to my letter and initial deposit written August 9, 1977. Enclosed in that letter were two checks, #9777313 and #0271 41364 \$115,456.90.

Since I have heard nothing in regard to this letter I am beginning to get apprehensive about its arrival. Would you please verify that the checks did arrive and inform me as to when the signature cards will be sent and whatever other information you may need.

Enclosed in my initial letter was a letter from Mrs. Marceline Jones to whom the checks were also made out. These checks were to go into a new account and not into her already established account with you.

Please send any return correspondence to: Carolyn Layton, P.O. Box 893, Georgetwon, Guyana. She will see that all information gets to me as soon as possible.

I would appreciate a prompt reply on this and I thank you for your cooperation on the matter.

*Marceline J. Jones*

RR-5-a-1

REGISTERED NO. 15-725

Value \$ NV	Special Delivery \$
Reg Fee \$ 2.10	Return Receipt \$ 32
Handling Charge \$	Restricted Delivery \$
Postage \$ 62	<input type="checkbox"/> AIRMAIL

POSTMASTER (By) *E. Jones*



MAILING OFFICE

FROM *Jones*  
*S.F. Cal*

TO *Bank of Nova Scotia*  
*Nassau*  
*RR-5-6-3*

GPO 1974-535-543

REGISTERED NO. 15-15169

Value \$ NV	Special Delivery \$
Reg Fee \$ 2.10	Return Receipt \$ 32
Handling Charge \$	Restricted Delivery \$
Postage \$ 25	<input checked="" type="checkbox"/> AIRMAIL

POSTMASTER (By) *E. Jones*

POSTMARK OF



FROM *Jones*

TO *Eric Sawyer*

GPO 1976-899-283

REGISTERED NO. 15-15168

Value \$ NV	Special Delivery \$
Reg Fee \$ 2.10	Return Receipt \$ 32
Handling Charge \$	Restricted Delivery \$
Postage \$ 50	<input checked="" type="checkbox"/> AIRMAIL

POSTMASTER (By) *E. Jones*

POSTMARK OF



MAILING OFFICE

FROM *Jones*

TO *Eric Sawyer*  
*Bank of Nova Scotia P.O. Box*  
*Nassau Bahamas*  
*RR-5-6-1*

GPO 1976-899-283

REGISTERED NO. 15-801

Value \$ NV	Special Delivery \$
Reg Fee \$ 2.10	Return Receipt \$ .25
Handling Charge \$	Restricted Delivery \$
Postage \$ .93	<input type="checkbox"/> AIRMAIL

POSTMASTER (By) *E. Jones*

POSTMARK OF



MAILING OFFICE

FROM *M. Jones*

TO *P.O. Box 15384*  
*S.F. Calif. 94115*  
*ERIC S. SAWYER - MGR.*  
*THE BANK OF NOVA SCOTIA*  
*MARKETWALK 2ND MARY LEM ROAD,*  
*P.O. Box H-1518 NASSAU, BAHAMAS*

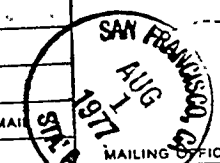
GPO 1974-535-543

REGISTERED NO. 15-567

Value \$ NV	Special Delivery \$
Reg Fee \$ 2.10	Return Receipt \$
Handling Charge \$	Restricted Delivery \$
Postage \$ 50	<input type="checkbox"/> AIRMAIL

POSTMASTER (By) *E. Jones*

POSTMARK OF



MAILING OFFICE

FROM *M. Jones*

TO *P.O. Box 15384*  
*S.F. Calif*  
*Eric Sawyer*  
*P.O. Box H-1518*  
*Nassau, Bahamas*  
*RR-5-6-2*

GPO 1974-803-296

### SAVE THIS RECEIPT FOR REGISTERED MAIL

**COVERAGE**—Domestic insurance for registered mail is limited to (1) the value of the article at the time of mailing or the cost of replacement if lost or totally damaged, or (2) the cost of repairs. Coverage may not exceed the limit fixed for the registry fee paid. Consult postmaster for additional details of insurance limits and coverage for domestic registered mail.

**FILING CLAIM**—Claim must be filed within 1 year from the date of mailing. Present this receipt and submit evidence of value, cost of repairs, or cost of duplication.

**FOREIGN COUNTRIES**—Consult postmaster as to insurance coverage on registered articles addressed to foreign countries.

GPO 1974-535-543

PS Form 3806, Mar. 1974

### SAVE THIS RECEIPT FOR REGISTERED MAIL

**COVERAGE**—Domestic insurance for registered mail is limited to (1) the value of the article at the time of mailing or the cost of replacement if lost or totally damaged, or (2) the cost of repairs. Coverage may not exceed the limit fixed for the registry fee paid. Consult postmaster for additional details of insurance limits and coverage for domestic registered mail.

**FILING CLAIM**—Claim must be filed within 1 year from the date of mailing. Present this receipt and submit evidence of value, cost of repairs, or cost of duplication.

**FOREIGN COUNTRIES**—Consult postmaster as to insurance coverage on registered articles addressed to foreign countries.

☆ GPO: 1976 - 599 - 283

PS Form 3806, Mar. 1974

### SAVE THIS RECEIPT FOR REGISTERED MAIL

**COVERAGE**—Domestic insurance for registered mail is limited to (1) the value of the article at the time of mailing or the cost of replacement if lost or totally damaged, or (2) the cost of repairs. Coverage may not exceed the limit fixed for the registry fee paid. Consult postmaster for additional details of insurance limits and coverage for domestic registered mail.

**FILING CLAIM**—Claim must be filed within 1 year from the date of mailing. Present this receipt and submit evidence of value, cost of repairs, or cost of duplication.

**FOREIGN COUNTRIES**—Consult postmaster as to insurance coverage on registered articles addressed to foreign countries.

☆ GPO: 1976 - 599 - 283

PS Form 3806, Mar. 1974

### SAVE THIS RECEIPT FOR REGISTERED MAIL

**COVERAGE**—Domestic insurance for registered mail is limited to (1) the value of the article at the time of mailing or the cost of replacement if lost or totally damaged, or (2) the cost of repairs. Coverage may not exceed the limit fixed for the registry fee paid. Consult postmaster for additional details of insurance limits and coverage for domestic registered mail.

**FILING CLAIM**—Claim must be filed within 1 year from the date of mailing. Present this receipt and submit evidence of value, cost of repairs, or cost of duplication.

**FOREIGN COUNTRIES**—Consult postmaster as to insurance coverage on registered articles addressed to foreign countries.

☆ GPO: 1974-535-543

PS Form 3806, Mar. 1974

### SAVE THIS RECEIPT FOR REGISTERED MAIL

**COVERAGE**—Domestic insurance for registered mail is limited to (1) the value of the article at the time of mailing or the cost of replacement if lost or totally damaged, or (2) the cost of repairs. Coverage may not exceed the limit fixed for the registry fee paid. Consult postmaster for additional details of insurance limits and coverage for domestic registered mail.

**FILING CLAIM**—Claim must be filed within 1 year from the date of mailing. Present this receipt and submit evidence of value, cost of repairs, or cost of duplication.

**FOREIGN COUNTRIES**—Consult postmaster as to insurance coverage on registered articles addressed to foreign countries.

☆ GPO: 1974-563-269

PS Form 3806, Mar. 1974



**UNITED STATES POSTAL SERVICE  
OFFICIAL BUSINESS**

**SENDER INSTRUCTIONS**

- Print your name, address, and ZIP Code in the space below.
- Complete items 1, 2, and 3 on the reverse.
  - Moisten gummed ends and attach to front of article if space permits. Otherwise affix to back of article.
  - Endorse article "Return Receipt Requested" adjacent to number.

**PENALTY FOR PRIVATE  
USE TO AVOID PAYMENT  
OF POSTAGE, \$300**



**RETURN  
TO**



M. Jones  
(Name of Sender)

P.O. Box 15384  
(Street or P.O. Box)

SAN FRANCISCO, CALIF. 94115  
(City, State, and ZIP Code)

*RE-5-C-1*



**Scotiabank**

**THE BANK OF NOVA SCOTIA**

Marlborough & Navy Lion Road

**ERIC S. SAWYER**  
MANAGER

P. O. BOX N-7518  
NASSAU, BAHAMAS

PHONE 274012

*RE-5-C-1*



PS Form 3811, Mar. 1976

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

● SENDER: Complete items 1, 2, and 3.  
Add your address in the "RETURN TO" space on reverse.

1. The following service is requested (check one).
- Show to whom and date delivered..... 15¢
  - Show to whom, date, & address of delivery.. 35¢
  - RESTRICTED DELIVERY.  
Show to whom and date delivered..... 65¢
  - RESTRICTED DELIVERY. i)  
Show to whom, date, and address of delivery 85¢

2. ARTICLE ADDRESSED TO: *ERIC S. SAYER  
MANAGER THE BANK OF NOVA  
SCOT. A/ MANBOROUGH & NORTON  
LION ROAD - PO BOX N 757  
NASSAU, BAHAMAS*

3. ARTICLE DESCRIPTION:

REGISTERED NO.	CERTIFIED NO.	INSURED NO.
<i>15-801</i>		

(Always obtain signature of addressee or agent)

I have received the article described above.  
SIGNATURE  Addressee  Authorized agent

*[Signature]*

4. DATE OF DELIVERY POSTMARK

5. ADDRESS (Complete only if requested)

6. UNABLE TO DELIVER BECAUSE:

*c-1a*

*BAHAMAS*

CLERK'S INITIALS