

**DECLARATION
concerning non-receipt
(or receipt) of a postal item**

Nature of item	<input type="checkbox"/> Priority <input type="checkbox"/> Non-priority <input type="checkbox"/> Parcel <input type="checkbox"/> Registered			
	<input type="checkbox"/> Letter	<input type="checkbox"/> Printed paper	<input type="checkbox"/> Small packet	<input type="checkbox"/> Insured
Special particulars	Insured value			
	<input type="checkbox"/> Airmail <input type="checkbox"/> S.A.L. <input type="checkbox"/> Express <input type="checkbox"/> Advice of receipt <input type="checkbox"/>			
	<input type="checkbox"/> COD COD amount and currency			
	Other information			
Posting	No. of item			
	Date of posting		Office of posting	
	Weight of item			
Sender	Name and full address			
Addressee	Name and full address			
Contents	Precise description of contents			

Declaration	<input type="checkbox"/> This item was delivered to me on _____ Date _____	
	<input type="checkbox"/> I have not received this item by post or by any other means	
	Place and date	
	Signature	