

- FOLD -

NAME (Last, First, MI) (Print): RECEPTACLE NUMBER:

[Empty fields for name and receptacle number]

STATUS

ADV ASG LEAVE CONFINED
TDY HOSPITAL AWOL

EFFECTIVE DATES TO FWD OR HOLD MAIL (Yr, Mo, Day)

FROM: TO:

FORWARD ALL MAIL HOLD ALL MAIL

FORWARD ONLY

LETTER PAPERS NEWS PAPERS MAG
PATCHES (S) (R) (U) (S) (S)

COMPLETE FORWARDING ADDRESS:

[Empty space for forwarding address]

SPECIAL INSTRUCTIONS:

[Empty space for special instructions]

SIGNATURE OF RECEPTACLE HOLDER DATE (Yr, Mo, Day)

SIGNATURE DATE

- FOLD -

FORWARD