

**TEMPORARY MAIL DISPOSITION  
INSTRUCTIONS**

----- FOLD -----

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

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
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**FORWARD ONLY**

LETTERS	PARCELS	NEWSPAPERS/MAG
PAYCHECK(S)	OTHER (Use Spec Inst)	

COMPLETE FORWARDING ADDRESS:

SPECIAL INSTRUCTIONS:

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

----- FOLD -----

**FOR ADVANCE RECEPTACLE ASGN,  
LIST NAME OF SPONSOR AND  
DUTY PHONE IN THE SPECIAL  
INSTRUCTIONS BLOCK.**