

**TEMPORARY MAIL DISPOSITION
INSTRUCTIONS**

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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 <i>(Use Spec Inst)</i>	

COMPLETE FORWARDING ADDRESS:

SPECIAL INSTRUCTIONS:

SIGNATURE OF RECEPTACLE HOLDER	DATE (Yr, Mo, Day)
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**FOR ADVANCE RECEPTACLE ASGN,
LIST NAME OF SPONSOR AND
DUTY PHONE IN THE SPECIAL
INSTRUCTIONS BLOCK.**