| TEMPORARY MAIL DISPOSITION INSTRUCTIONS | | | | | | |
|---|--------------------|-----------------------------|--|--|--|--|
| FOLD | | | | | | |
| NAME (Last, First | RECEPTACLE NUMBER: | | | | | |
| | | | | | | |
| | STATUS | | | | | |
| ADV ASG | LEAVE | CONFINED | | | | |
| TDY | HOSPITAL | | | | | |
| EFFECTIVE DATES TO FWD OR HOLD MAIL (Yr, Mo, Day) | | | | | | |
| FROM: | TO: | | | | | |
| 1 | | HOLD ALL MAII | | | | |
| FORWARD ALI | FORWARD (| HOLD ALL MAIL | | | | |
| LETTERS | | | | | | |
| LETTERS | | 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. | | | | | | |

DD Form 2258, JAN 82

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