PRINT NAME (Last, First, MI)		GRADE	SSN	PURGE DATA
NEW ORGANIZATION (Complete Desig	nation)			BOX NUMBER
DATA REQUIRED BY THE PRIVAC Feb. 59. PRINCIPAL PURPOSE: To personnel in mail functions and addr civilian inspectors. DISCLOSURE: Vi ability to forward mail.	route and forward (Dire	ctory) mail. RC nspected by co	OUTINE USES: Use	d by Army military and civilian
OLD MAILING ADDRESS (Include BOX ZIP Code)	No., if any, and	NEW MAILI	NG ADDRESS (Inc	lude ZIP Code)
DATE DEPARTED OLD ORG:	DATE DUE NEW ORG:			
QUARTERS/OFF POST ADDRESS		REMARKS		
CONSENT: I DO I DO NOT CONSENT TO RELEASE THE ABOVE HOME ADDRESS OR SSN TO THIRD PARTIES.		(IF DEPARTING, COMPLETE BELOW ITEMS)		
		HEADQUARTERS ISSUING ORDERS		
SIGNATURE	DATE	ORDER NU	MBER	ORDER DATE
DA 1 FORM 3955	EDITION OF 1 AU	C	HANGE OF ADDR	ESS AND DIRECTORY CARD