

NAME (Last, First, Middle Initial)	SSN	GRADE	DISCARD DATE (Mo.,Yr.)
JOINED FROM	DATE	UNIT ASSIGNED	
	UD NO.		

DROPPED (New duty station, home address etc. - complete address with EDA)

SIGNATURE (required)	DATE	UD NO. (Only if no signature)
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**MAIL DIRECTORY FILE CARD (5119) NAVMC 10572 (REV. 11-96) (EF)**  
 (Previous editions are obsolete)

TEMPORARY STATUS (Tad, SK, UA, Conf, Ihca)	TO	FROM	TEMPORARY STATUS (Tad, SK, UA, Conf, Ihca)	TO	FROM
	DATE	DATE		DATE	DATE
	UD NO.	UD NO.		UD NO.	UD NO.