

A05706

Mail this postcard to businesses and people who send you mail.

Please send mail to new address beginning: 080197

Month Day Year

Wolfs Hair Ltd

My Name (Last name, first name, middle initial)

Wolfs Hair Ltd

OLD Complete Street Address or PO Box or Rural Route and RR Box

2560 Fruitville Rd

Apt./Suite #

FI 34237

City or Post Office

Sarasota

State

ZIP or ZIP+4 Code

NEW Complete Street Address or PO Box or Rural Route and RR Box

Wolfs Hair Ltd

Apt./Suite #

FI

134230-663

City or Post Office

Sarasota

State

ZIP or ZIP+4 Code

NEW Telephone Number (Optional)

Account Number (if applicable)

Wolfs Hair Ltd

GP

0804913

Signature

Today's Date: Month Day Year

Kelly
9/10