Mmmmm d, 20YY

Prefix [*Mr./Ms./Dr.* or *Rank*] Full Name [*first, MI., last*] *(If used, rank is not abbreviated.)*

Position Title *(if applicable)*

Organization *(if applicable)*

Address1

APO AE [or City, State] ZIP Code

Dear Prefix Last Name:

 xxx

 xxx

 xxx

 xxx

 xxx

 Sincerely,

 First Name MI. Last Name

 Rank, U.S. Army [*Delete this line if not military*]

 Duty Position Title