Mail this card to all people, businesses and publications who send you mail. For publications, tape an old address label over name and old address sections and complete new address. **COMPLETE ADDRESS PORTION ON FRONT OF FORM with Name, Street** Address, City, State and ZP Code of Individual or Business to whom you are relaying this card.

	-77-11-121-1	
Your Name	Print or Type-Last Name, First Name, Middle Initia Alliance Mortgo	
Old Address	No. and Street	Apt/Suite P.O. Box R.D. No. Rural Box No. No.
	City and State	ZIP + 4 Code
New Address	No. and Street	Apt/Suite P.O. Box R.D. No. Rural Box No.
	3350 Americana City and State	3 6 0 ZIP + 4 Code
	B='se, ID	83706-111
Sign Here	in effe	new address set ~/-944
	Cabut ? Marks 9	-1-17

PS FORM 3576, 11/92

RECEIVER: Be sure to record the above new address in your address book at home or office.

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