

\_\_\_\_\_ County where posted  
\_\_\_\_\_ Name of Camp  
\_\_\_\_\_ Date and Place of Birth  
\_\_\_\_\_ Internment Serial Number  
\_\_\_\_\_ Name (Last, first MI)

SENDER:

-----  
*(Fold on this line)*  
-----

PRISONER OF WAR MAIL                      LETTER

Language \_\_\_\_\_

To \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

Country \_\_\_\_\_

Province or Department \_\_\_\_\_

-----  
*(Fold on this line)*  
-----

DO NOT WRITE HERE

-----  
*(Fold on this line)*  
-----

**DO NOT WRITE BEYOND HEAVY LINES**

Lined writing area consisting of multiple horizontal rows for text entry.