

ROUTING AND TRANSMITTAL SLIP		Date
		<i>27 JUL</i>
TO: (Name, office symbol, room number, building, Agency/Post)	Initials	Date
1. <i>MEL</i>		
2.		
3.		
4.		
5.		
Action	File	Note and Return
Approval	For Clearance	Per Conversation
As Requested	For Correction	Prepare Reply
Circulate	For Your Information	See Me
Comment	Investigate	Signature
Coordination	Justify	
REMARKS		
<p style="font-size: 2em; font-family: cursive;">Please see me about this.</p>		

DO NOT use this form as a RECORD of approvals, concurrences, disposals, clearances, and similar actions

FROM: (Name, org. symbol, Agency/Post)	Room No.—Bldg.
<i>ASB</i>	Phone No.

5041-102
 ☆ U.S. G.P.O. 1977-241-530/3090

OPTIONAL FORM 41 (Rev. 7-76)
 Prescribed by GSA
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