

SENDER WILL CHECK		CLASSIFICATION TOP AND BOTTOM	
<input type="checkbox"/> UNCLASSIFIED	<input checked="" type="checkbox"/> CONFIDENTIAL	<input type="checkbox"/>	<input type="checkbox"/> SECRET
OFFICIAL ROUTING SLIP			
TO	NAME AND ADDRESS	DATE	INITIALS
1	[REDACTED]		Am
2	[REDACTED] AMR		[Signature]
3	DD/ORD		[Signature]
4	O/ORD	7/17	[Signature]
5			
6	[REDACTED]		
<input type="checkbox"/> ACTION	<input type="checkbox"/> DIRECT REPLY	<input type="checkbox"/> PREPARE REPLY	
<input type="checkbox"/> APPROVAL	<input type="checkbox"/> DISPATCH	<input type="checkbox"/> RECOMMENDATION	
<input type="checkbox"/> COMMENT	<input type="checkbox"/> FILE	<input checked="" type="checkbox"/> RETURN	
<input type="checkbox"/> CONCURRENCE	<input checked="" type="checkbox"/> INFORMATION	<input type="checkbox"/> SIGNATURE	
Remarks:			
FOLD HERE TO RETURN TO SENDER			
FROM: NAME, ADDRESS AND PHONE NO.			DATE
[REDACTED]			7/2/79
<input type="checkbox"/> UNCLASSIFIED		<input type="checkbox"/> SECRET	

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