

SENDER WILL CHECK CLASSIFICATION OF AND BOTTOM			
<input checked="" type="checkbox"/> UNCLASSIFIED	<input type="checkbox"/> CONFIDENTIAL	<input type="checkbox"/> SECRET	
OFFICIAL ROUTING SLIP			
TO	NAME AND ADDRESS	DATE	INITIALS
1	C/DED	23 FEB 1976	<i>[Signature]</i>
2			
3	C/OTS/CB		
4			
5			
6			
<input type="checkbox"/>	<b>ACTION</b>	<input type="checkbox"/>	<b>DIRECT REPLY</b>
<input type="checkbox"/>	<b>APPROVAL</b>	<input type="checkbox"/>	<b>DISPATCH</b>
<input type="checkbox"/>	<b>COMMENT</b>	<input type="checkbox"/>	<b>FILE</b>
<input type="checkbox"/>	<b>CONCURRENCE</b>	<input type="checkbox"/>	<b>INFORMATION</b>
<input type="checkbox"/>		<input type="checkbox"/>	<b>PREPARE REPLY</b>
<input type="checkbox"/>		<input type="checkbox"/>	<b>RECOMMENDATION</b>
<input type="checkbox"/>		<input type="checkbox"/>	<b>RETURN</b>
<input type="checkbox"/>		<input type="checkbox"/>	<b>SIGNATURE</b>
<p><b>Remarks:</b></p> <p style="text-align: center; margin-top: 20px;">Your copy.</p> <div style="display: flex; align-items: center; margin-top: 20px;"> <div style="border: 1px solid black; width: 80px; height: 60px; margin-right: 10px;"></div> <div style="font-family: cursive; font-size: 1.5em;">pls see me [Signature]</div> </div>			
FOLD HERE TO RETURN TO SENDER			
FROM: NAME, ADDRESS AND PHONE NO.			DATE
<input type="checkbox"/> UNCLASSIFIED	<input type="checkbox"/> CONFIDENTIAL	<input type="checkbox"/> SECRET	

SG11