

ROUTING AND TRANSMITTAL SLIP		Date 22 JAN	
TO: (Name, office symbol, room number, building, Agency/Post)		Initials	Date
1.	Col Capps	Jc	Jan 22
2.	Col Wells agree!	new	22/1/80
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

Don't see how the Request can be denied.

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.
Maj. Stone	
	Phone No. 55048

5041-102

OPTIONAL FORM 41 (Rev. 7-76)
 Prescribed by GSA
 FPMR (41 CFR) 101-11.206

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