Date **ROUTING AND TRANSMITTAL SLIP** TO: (Name, office symbol, room number, building, Agency/Post) Initials Date 2. 3. 4. 5. Note and Return Action File For Clearance Approval Per Conversation As Requested For Correction Prepare Reply Circulate For Your Information See Me Comment Investigate Signature Coordination Justify **REMARKS**

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

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FROM: (Name, organization symbol, Agency/Post)	Room Number - Building
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