

ROUTING AND TRANSMITTAL SLIP

TO: (Name, office symbol, room number, building, Agency/Post)	Initials	Date
1. <i>PAG</i>	<i>K</i>	
2.		
3.		
4.		
5.		

<input checked="" type="checkbox"/> 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

SAR in response to DR question re our 16 Sep 94 input. Must be included for submission 87 OCT SAR.

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

FR

SGFOIA3
Approved

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