

DEPARTMENT OF JUSTICE  
ROUTING SLIP

TO:	NAME	FUNCTION	BUILDING	ROOM
1.	Mr. Long			
2.				
3.				
4.				

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> SIGNATURE                                | <input type="checkbox"/> COMMENT          | <input type="checkbox"/> PER CONVERSATION |
| <input type="checkbox"/> APPROVAL                                 | <input type="checkbox"/> NECESSARY ACTION | <input type="checkbox"/> AS REQUESTED     |
| <input type="checkbox"/> SEE ME                                   | <input type="checkbox"/> NOTE AND RETURN  | <input type="checkbox"/> NOTE AND FILE    |
| <input type="checkbox"/> RECOMMENDATION                           | <input type="checkbox"/> CALL ME          | <input type="checkbox"/> YOUR INFORMATION |
| <input type="checkbox"/> ANSWER OR ACKNOWLEDGE ON OR BEFORE _____ |   |   |
| <input type="checkbox"/> PREPARE REPLY FOR THE SIGNATURE OF _____ |   |   |

REMARKS

More transmittals.

*MURKIN*

*No action  
Necessary*

FROM:	NAME	BUILDING & ROOM	EXT.	DATE
	J. Harold Flannery	Main 1135	3831	4/18

*J.H.F.*

44-38861-1823