

Form No. CM-1a
(Rev. 11-20-63)

DEPARTMENT OF JUSTICE
ROUTING SLIP

| TO: | NAME | DIVISION | BUILDING | ROOM |
|-----|-------------------|----------|----------|------|
| 1. | <i>Carl Belch</i> | | | |
| 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 _____ | | |

Do we know anything about this fellow, or CIA connections, or what he's in jail for, etc.

FV

*10/31
to 159-11
143-7521
Greaney*

| FROM: | NAME | BUILDING, ROOM, EXT. | DATE |
|-------|---|----------------------|-------|
| | ASSISTANT ATTORNEY GENERAL Criminal Division | | |
| | | | 10/31 |
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