

GENERAL SERVICES ADMINISTRATION  
ROUTING SLIP

TO	CO	R1	R2	R3	R4	R5	R6	R7	R8	R9	R10	
NAME AND/OR SYMBOL						BUILDING, ROOM, ETC.						
1.	<del>Mr. Paulsen</del>											
2.	<del>Mr. Williams</del>											
3.	Files											
4.												
5.												

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> ALLOTMENT SYMBOL                         | <input type="checkbox"/> HANDLE DIRECT              | <input type="checkbox"/> READ AND DESTROY |
| <input type="checkbox"/> APPROVAL                                 | <input type="checkbox"/> IMMEDIATE ACTION           | <input type="checkbox"/> RECOMMENDATION   |
| <input type="checkbox"/> AS REQUESTED                             | <input type="checkbox"/> INITIALS                   | <input type="checkbox"/> SEE ME           |
| <input type="checkbox"/> CONCURRENCE                              | <input type="checkbox"/> NECESSARY ACTION           | <input type="checkbox"/> SIGNATURE        |
| <input type="checkbox"/> CORRECTION                               | <input type="checkbox"/> NOTE AND RETURN            | <input type="checkbox"/> YOUR COMMENT     |
| <input type="checkbox"/> FILING                                   | <input type="checkbox"/> PER OUR CONVERSATION       | <input type="checkbox"/> YOUR INFORMATION |
| <input type="checkbox"/> FULL REPORT                              | <input type="checkbox"/> PER TELEPHONE CONVERSATION | <input type="checkbox"/>                  |
| <input type="checkbox"/> ANSWER OR ACKNOWLEDGE ON OR BEFORE _____ |   |   |
| <input type="checkbox"/> PREPARE REPLY FOR THE SIGNATURE OF _____ |   |   |

REMARKS

*This is not conclusive yet!*

*CNSj.*

*noted*

*2-25-64 J.F.R.*

FROM	CO	R1	R2	R3	R4	R5	R6	R7	R8	R9	R10
NAME AND/OR SYMBOL						BUILDING, ROOM, ETC.			DATE		