

ROUTING AND TRANSMITTAL SLIP		Date	
TO: (Name, office symbol, room number, building, Agency/Post)		Initials	Date
1.	CICTG	F	6/15
2.	D/O/R/D	CP	6/18
3.	D/O/R/D	PE	6/26
4.			
5.			
Act	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

*It seems the DOD has let the  
cat out of the bag. (see page 3)  
With friends like this . . .*

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

FROM: (Name, org. symbol, Agency/Post)	Room No.—Bldg.
	Phone No.

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AL FORM 41 (Rev. 7-76)

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