

TO: (Name, office symbol, room number, Building, Agency/Post)	Initials	Date
1. Col <i>CAAS</i>	<i>X</i>	2/Nov
2. Col Wells	<i>KW</i>	24 Nov
3. MG THOMPSON		
4.		
5.		

Action	File	Note and Return
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Coordination	Justify	

REMARKS

GRILL FLAME (U)
 CLOSE HOLD/HAND CARRY

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

FROM: (Name, org. symbol, Agency/Post) <i>Maj Stone</i>	Room No.—Bldg.
	Phone No. <i>5-5848</i>

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