

**ROUTING AND TRANSMITTAL SLIP**

Date *29 Dec 80*

TO: (Name, office symbol, room number, building, Agency/Post)	Initials	Date
1. <i>LTO M. Watt, IAOPS-H.S. INSCOM</i>		
2. <i>Beag 4553</i>		
3.		
4.		
5.		

Action	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**

*Attached funded for your project.*

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

FROM: (Name, org./symbol, Agency/Post) <i>Kylen Brainer</i> <i>IAR M-8-FM</i>	Room No.—Bldg.
	Phone No. <i>X6947</i>

5041-102

\* GPO : 1977 O - 241-530 (3450)

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