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UNCLASSIFIED      RESTRICTED      CONFIDENTIAL      SECRET (SENDER WILL CIRCLE CLASSIFICATION TOP AND BOTTOM)															
CENTRAL INTELLIGENCE AGENCY OFFICIAL ROUTING SLIP															
TO		INITIALS	DATE												
1	Chief, Real Estate & Constr. 2nd Floor, Wing E, Alcott Hall														
2	Mr. [REDACTED] R.E.&Const. 2nd Floor, Wing E, Alcott Hall														
3															
4															
5															
FROM		INITIALS	DATE												
1	Procurement and Supply Office Quarters Eye, Ext. 651														
2															
3															
<table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> APPROVAL</td> <td><input checked="" type="checkbox"/> INFORMATION</td> <td><input type="checkbox"/> SIGNATURE</td> </tr> <tr> <td><input checked="" type="checkbox"/> ACTION</td> <td><input type="checkbox"/> DIRECT REPLY</td> <td><input type="checkbox"/> RETURN</td> </tr> <tr> <td><input type="checkbox"/> COMMENT</td> <td><input type="checkbox"/> PREPARATION OF REPLY</td> <td><input type="checkbox"/> DISPATCH</td> </tr> <tr> <td><input type="checkbox"/> CONCURRENCE</td> <td><input type="checkbox"/> RECOMMENDATION</td> <td><input type="checkbox"/> FILE</td> </tr> </table> <p><b>REMARKS:</b></p>				<input type="checkbox"/> APPROVAL	<input checked="" type="checkbox"/> INFORMATION	<input type="checkbox"/> SIGNATURE	<input checked="" type="checkbox"/> ACTION	<input type="checkbox"/> DIRECT REPLY	<input type="checkbox"/> RETURN	<input type="checkbox"/> COMMENT	<input type="checkbox"/> PREPARATION OF REPLY	<input type="checkbox"/> DISPATCH	<input type="checkbox"/> CONCURRENCE	<input type="checkbox"/> RECOMMENDATION	<input type="checkbox"/> FILE
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CENTRAL INTELLIGENCE AGENCY OFFICIAL ROUTING SLIP			
TO	INITIALS	DATE	
1	[REDACTED]	[REDACTED]	22 Mar
2	<i>Mr. Sullivan</i>	[REDACTED]	21 Mar
3	[REDACTED]	[REDACTED]	7 Mar
4	[REDACTED]	[REDACTED]	[REDACTED]
5	<i>Chief, R &amp; C</i>	[REDACTED]	10 March
FROM			DATE
6	<i>Admin Staff File</i>	[REDACTED]	
2		<i>PH</i>	
3			

<input type="checkbox"/> APPROVAL	<input type="checkbox"/> INFORMATION	<input type="checkbox"/> SIGNATURE
<input type="checkbox"/> ACTION	<input type="checkbox"/> DIRECT REPLY	<input type="checkbox"/> RETURN
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**REMARKS:**

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