

Eyes Only

SENDER WILL CHECK CLASSIFICATION TOP AND BOTTOM			
<input checked="" type="checkbox"/> UNCLASSIFIED	<input type="checkbox"/> CONFIDENTIAL	<input checked="" type="checkbox"/> SECRET	
CENTRAL INTELLIGENCE AGENCY OFFICIAL ROUTING SLIP			
TO	NAME AND ADDRESS	INITIALS	DATE
1	<i>Comptroller</i>	<i>JL</i>	<i>29 Jan 57</i>
2	<i>Chief Finance Dir.</i>	<i>JSB</i>	<i>1/31</i>
3			
4			
5			
6			
<input type="checkbox"/>	ACTION	<input type="checkbox"/> DIRECT REPLY	<input type="checkbox"/> PREPARE REPLY
<input type="checkbox"/>	APPROVAL	<input type="checkbox"/> DISPATCH	<input type="checkbox"/> RECOMMENDATION
<input type="checkbox"/>	COMMENT	<input type="checkbox"/> FILE	<input type="checkbox"/> RETURN
<input type="checkbox"/>	CONCURRENCE	<input type="checkbox"/> INFORMATION	<input type="checkbox"/> SIGNATURE
<p>Remarks:</p> <p style="font-size: 2em; text-align: center;"><i>on file</i></p> <p style="font-size: 3em; text-align: center;"><i>Eyes Only</i></p>			
FOLD HERE TO RETURN TO SENDER			
FROM: NAME, ADDRESS AND PHONE NO.			DATE
			<i>JSB 1/25</i>
<input type="checkbox"/> UNCLASSIFIED	<input type="checkbox"/> CONFIDENTIAL	<input checked="" type="checkbox"/> SECRET	

FORM NO. 237
1 APR 55

Replaces Form 30-4
which may be used.

(40)
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