ROUTING AND TRANSMITTAL SLIP

Date

TO: *(Name, office symbol, room number, building, Agency/Post)*	Initials	Date
1.		
2.		
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

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

FROM: *(Name, organization symbol, Agency/Post)*	Room Number - Building
	Phone Number