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| **Routing Slip** | | | **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | |
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| **To (Name, office symbol, room number, building, agency, post)** | | | | | **Initials** | | **Date** |
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|  | **Action** | |  | **For Your Information** | | | |
|  | **Approval** | |  | **Investigate** | | | |
|  | **As Requested,** | |  | **Justify** | | | |
|  | **Circulate** | |  | **Note and Return** | | | |
|  | **Comment** | |  | **Per Conversation** | | | |
|  | **Coordination** | |  | **Prepare Reply** | | | |
|  | **File** | |  | **See Me** | | | |
|  | **For Clearance** | |  | **Signature** | | | |
|  | **For Correction** | |  | **Other** | | | |
| **Remarks** | | | | | | | |
| **From (Name, organization symbol, Agency, Post)** | | |  | | | | |
| **Room Number:** | |  | **Phone Number:** | | |  | |