ROUTING AND TRANSMITTAL SLIP

Date 8/15/83

	To (Name, office symbol, room number, building, Agency/Post)	Initials	Date
1.	Pat Roberts		
2.			
3.			
4.			
5.			

Action	File	Note and Return
Approval	For Clearance	For Conversation
As Requested	For Correction	Prepare Reply
Circulate	For Your Information	See Me
Comment	Investigate	Signature
Coordination	Justify	

REMARKS

Samples UN-159 through UN-176 did not originate from the Oregon area, they were sent to us from Region X, I don't feel it is necessary to send you sending information on these samples at this time.

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

FROM: (Name, org. symbol, Agency/Post) Room No.—Bldg.

Avery EPA/ECL Phone No. 442-3212

5041-102

OPTIONAL FORM 41 (Rev. 7-76)
Prescribed by GSA
FPMR 101-11.206