

U. S. Postal Service ROUTING SLIP		Office or Room No.	<input type="checkbox"/> Approval <input type="checkbox"/> Signature <input type="checkbox"/> Comment <input type="checkbox"/> See Me <input type="checkbox"/> As Requested <input type="checkbox"/> Information <input type="checkbox"/> Read and Return <input type="checkbox"/> Read and File <input type="checkbox"/> Necessary Action <input type="checkbox"/> Investigate <input type="checkbox"/> Recommendation <input type="checkbox"/> Prepare Reply <input type="checkbox"/>
To:			
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Date			Room No.
Remarks:			