NOUTING AND	TRANSMITTAL SUP	Date		
TO: (Name, office symbol, room number, building, Agency/Post)  1. A Brodsky		6-6-79		
			Initials	Date
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Action	File	Note	and Return	
Approval	For Clearance	THE RESERVE AND PERSONS ASSESSED.	Conversation	
As Requested	For Correction	The second second	re Reply	
Circulate	For Your Information	See A	Name and Address of the Owner, where the Parket of the Owner, where the Parket of the Owner, where the Owner, which is	
Comment	Investigate	Signa	sture	
Coordination EMARKS	Justify			
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