

RECORDS TRANSMITTAL AND RECEIPT

Complete and send original and two copies of this form to the appropriate Federal Records Center for approval prior to shipment of records. See specific instructions on reverse.

PAGE 1 OF 1

1. TO (Complete the address for the appropriate records center serving your area)

Federal Archives and Records Center
General Services Administration
Washington National Records Center
Washington, D.C. 20409

2. AGENCY TRANSFER AUTHORIZATION

TRANSFERRING AGENCY OFFICIAL (Signature and title)
Chief, Record Management

DATE
12 FEB 1973

3. AGENCY CONTACT

TRANSFERRING AGENCY LIAISON OFFICIAL (Name, office and telephone No.)
Mr. Jesse Mc Neal OASD/ISA
Records and Control

4. RECORDS CENTER RECEIPT

RECORDS RECEIVED BY (Signature and title)

DATE

5. FROM (Enter the name and complete mailing address of the office retiring the records. The signed receipt copy of this form will be sent to this address)

330-79-039

Department of Defense
Washington Headquarters Services
Room 5C315
The Pentagon
Washington, D.C. 20301

RECORDS DATA

ACCESSION NUMBER			VOLUME (ow. fl.)	AGENCY BOX NUMBERS	SERIES DESCRIPTION (With inclusive dates of records)	RESTRICTION	DISPOSAL AUTHORITY (Schedule and item number)	DISPOSAL DATE	COMPLETED BY RECORDS CENTER																				
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(BT FILES)

Standard Form 135 (Rev. 6-76)
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