

# FASCIMILE TRANSMITTAL HEADER SHEET

For use of this form, see AR 25-11; the proponent agency is ODISC4

COMMAND/ OFFICE	NAME/ OFFICE SYMBOL	OFFICE TELEPHONE NO <i>(AUTOVON/Comm.)</i>	FAX NO. <i>(AUTOVON/Comm.)</i>
FROM:			
TO:			

CLASSIFICATION	PRECEDENCE	NO PAGES <i>(Including this Header)</i>	DATE - TIME	MONTH YEAR	RELEASER'S SIGNATURE
----------------	------------	--	-------------	------------	----------------------

REMARKS

*Space Below For Communications Center use Only*

--	--	--