

MEMO ROUTING SLIP		NEVER USE FOR APPROVALS, DISAPPROVALS, CONCURRENCES, OR SIMILAR ACTIONS	
1 NAME OR TITLE	14	INITIALS	CIRCULATE
ORGANIZATION AND LOCATION		DATE	COORDINATION
2			FILE
			INFORMATION
3			NECESSARY ACTION
			NOTE AND RETURN
4			SEE ME
			SIGNATURE
REMARKS			
<p>In collaboration with AFSA please advise as to</p> <p>(1) How this order affects us in the light of the Cryptic Security Bill, and</p> <p>(2) What action is required to arrange for necessary exclusions if any (see Para 7 a for definition of Atomic Energy Commission)</p>			
FROM NAME OR TITLE		DATE	
ORGANIZATION AND LOCATION		TELEPHONE	