FORM **CD-15** (12-6-73) PRESCR. BY DAO 214-2 **TRANSMIT/ROUTE**	U.S. DEPARTMENT OF COMMERCE		DATE

NAME	BUILDING, ROOM OR REFERENCE NO.	TAKE ACTION BELOW	INITIALS AND DATE

ACTION ITEMS

1. APPROVAL/SIGNATURE

2. CLEARANCE/INITIALS

3. RECOMMENDATION OR COMMENT

4. RETURN WITH MORE DETAILS

5. INVESTIGATE AND REPORT

6. NOTE AND SEE ME

7. NOTE AND RETURN

8. NOTE AND FILE

9. YOUR INFORMATION

10. PER OUR CONVERSATION

11. AS REQUESTED

12. NECESSARY ACTION

13. CIRCULATE AMONG STAFF

14. ANSWER DIRECTLY

15. PREPARE REPLY FOR SIGNATURE

OF: _____

COMMENTS

☐ *Continued on reverse*

FROM *(Name)*	BUILDING, ROOM OR REF. NO.	CODE AND EXTENSION

Comments *(continued)*