

UNITED STATES
 DEPARTMENT OF THE INTERIOR

APPORTIONMENT AND ALLOTMENT SCHEDULES TRANSMITTAL

_____ (Date)

To: 1. Director of Budget, Office of the Secretary

2. _____
 (Title and bureau of originating office)

Approval is requested of the attached proposed apportionment or reapportionment schedule, and / or activity allotment or revision of activity allotment program, as follows:

- S.F. 132, Agency No. _____, Apportionment or Reapportionment Schedule
- S.F. 142, Agency No. _____, Apportionment or Reapportionment Schedule
- DI-520, Activity Allotment Program
- DI-521, Revision No. _____, Revision of Activity or Project Allotments

SYMBOL NUMBER, APPROPRIATION TITLE, AND COMMENTS
(If additional space is needed, use reverse in tumble fashion)

SUBMITTED FOR APPROVAL	APPROVED
Name	Date
Title	Director of Budget
Bureau	