

401533

ROUTING AND TRANSMITTAL SLIP		ACTION	
1 TO (Name, office symbol or location) OGC: Cho*	INITIALS	CIRCULATE	
	DATE	COORDINATION	
2 PE: Geoghegan	INITIALS	FILE	
	DATE	INFORMATION	
3 EV: <u>Liverman</u>	INITIALS	NOTE AND RETURN	
	DATE	PER CONVERSATION	
4	INITIALS	SEE ME	
	DATE	SIGNATURE	
REMARKS			
<p>Attached for distribution and <u>information</u> are /s/ed copies of the DOE response to the OMB referral re:</p> <p style="text-align: center;">Bikini Atoll</p> <p>*Cindy: Please distribute copies where appropriate (marked with red on the green concurrence).</p> <p>cc: Susan Pearce/Laura Watkins</p> <p style="text-align: right;">03130</p> <p>Do NOT use this form as a RECORD of approvals, concurrences, disapprovals, clearances, and similar actions.</p>			
FROM (Name, office symbol or location) Kathy Ewing (OGC) - FED/rm 1147		DATE 2/23/78	
		PHONE 566-7090	

OPTIONAL FORM 41
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