

MEMO ROUTING SLIP

REF ID: A59004

NEVER USE FOR APPROVALS, DISAPPROVALS,
CONCURRENCES, OR SIMILAR ACTIONS

1	NAME OR TITLE General CANINE	INITIALS C		CIRCULATE
	ORGANIZATION AND LOCATION	DATE 4 JAN 1955		COORDINATION
2				FILE
				INFORMATION
3				NECESSARY ACTION
				NOTE AND RETURN <input checked="" type="checkbox"/>
4				SEE ME
				SIGNATURE

REMARKS

1. Prof. Wilks had to leave before signing but I've looked over the report for accuracy & it is OK.
2. Am sending a copy to heads of PROJ RD, C/SEC, & certain staff divisions for comment. When comments are received I'll summarize them & send to you.

FROM NAME OR TITLE	DATE 3 Jan 55
ORGANIZATION AND LOCATION MR. FRIEDMAN	TELEPHONE

FORM
1 FEB 50

95

Replaces DA AGO Form 895, 1 Apr 48, and AFHQ
Form 12, 10 Nov 47, which may be used.

16-48487-4 GPO

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1 NAME OR TITLE COL. MARCY	INITIALS	CIRCULATE
ORGANIZATION AND LOCATION PROD	DATE	COORDINATION
2 Dr. Kullback		FILE
		INFORMATION
3 Col. Davis P/P		NECESSARY ACTION
		NOTE AND RETURN
4 Col. Novello		SEE ME
CAPT. HOLTWICK C/SK		SIGNATURE
REMARKS <p>Would be most appreciative of such comments as are deemed appropriate on the various items in this trip report by Prof. Wilko</p> <p>sent on 3 Jan 55</p>		
FROM NAME OR TITLE		DATE
ORGANIZATION AND LOCATION		TELEPHONE

DD FORM 95
1 FEB 50

Replaces DA AGO Form 895, 1 Apr 48, and AFHQ Form 12, 10 Nov 47, which may be used.

16-48487-4 GPO

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1 NAME OR TITLE <i>General CANINE</i>	INITIALS		CIRCULATE
ORGANIZATION AND LOCATION	DATE		COORDINATION
2 <i>Suspense</i>			FILE
<i>10 Jan</i>			INFORMATION
3			NECESSARY ACTION
		<input checked="" type="checkbox"/>	NOTE AND RETURN
4			SEE ME
			SIGNATURE

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FROM NAME OR TITLE <i>J</i>	DATE <i>3 Jan 55</i>
ORGANIZATION AND LOCATION	TELEPHONE