U. S. COMMISSION ON CIVIL RIGHTS
ROUTING SLIP

TO:	DIVISION	ROOM
1. Dr. Hector P. Garcia		
2.		
3.		
4.		
5.		

- ☐ APPROVAL
- ☐ AS REQUESTED
- ☐ CALL ME
- ☐ ANSWER OR ACKNOWLEDGE
- ON OR BEFORE _____
- ☐ PREPARE REPLY FOR
- THE SIGNATURE OF _____
- ☐ COMMENT
- ☐ FILE
- ☐ INITIALS
- ☐ NECESSARY ACTION
- ☐ NOTE AND RETURN
- ☐ PER CONVERSATION
- ☐ RECOMMENDATION
- ☐ SEE ME
- ☐ SIGNATURE
- ☒ YOUR INFORMATION
- ☐ _____

REMARKS:

FROM: NAME	DIVISION	EXT.	DATE
J. R. Avena			
SWFO			

GSA-WASH DC 68-15853

CCR FORM 44
JUNE 1968