

Facsimile Message Routing Form

U.S. Department of Housing
and Urban Development
Office of Administration

Control No.(Operator use only)

Note: Use black ink only

1. Sender's Correspondence Code	2. Name of Originator (or person most familiar with material)	3. Phone Number	4. Room No.
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5. Authorizing Official (signature) _____ (printed or typed name)

X

6. Distribution (Please check the appropriate box(es))

- All Secretary's Representatives
- All State Offices
- All Area Offices
- Individual HUD Field Office
- Non-HUD

To: _____
(Recipient's Name)

FAX. No. _____

(Recipient's Office - City & State)

Tele. No. _____

From: _____

FAX. No. _____

Number of pages (including this cover page) _____

Subject/Remarks (if any)