

**REFERENCE REQUEST—FEDERAL RECORDS CENTERS**

**NOTE: Use a separate form for each request.**

**SECTION I—TO BE COMPLETED BY REQUESTING AGENCY**

ACCESSION NO. 100 604-1017	AGENCY BOX NUMBER -OF	RECORDS CENTER LOCATION NUMBER 007 64-147-01
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DESCRIPTION OF RECORD(S) OR INFORMATION REQUESTED

BOX

FOLDER (include file number and title)  
550 001

REMARKS

**NATURE OF SERVICE**

- FURNISH COPY OF RECORD(S) ONLY  
  PERMANENT WITHDRAWAL  
  TEMPORARY LOAN OF RECORD(S)  
  REVIEW  
  OTHER (Specify)

**SECTION II—FOR USE BY RECORDS CENTER**

- RECORDS NOT IN CENTER CUSTODY  
  RECORDS DESTROYED  
 WRONG ACCESSION NUMBER—PLEASE RECHECK  
 WRONG BOX NUMBER—PLEASE RECHECK  
 WRONG CENTER LOCATION—PLEASE RECHECK  
 ADDITIONAL INFORMATION REQUIRED TO IDENTIFY RECORDS REQUESTED  
 MISSING (Neither record(s), information nor charge card found in container(s) specified)  
 RECORDS PREVIOUSLY CHARGED OUT TO (Name, agency and date):

REMARKS

DATE

SERVICE

TIME REQUIRED

SEARCHER'S INITIALS

**SECTION III—TO BE COMPLETED BY REQUESTING AGENCY**

NAME OF REQUESTER Jeffery K. Smart Commander	TELEPHONE NO. <input type="checkbox"/> FTS 410-671-4430	DATE 3/14/95
NAME AND ADDRESS OF AGENCY (include street address, building, room no. and ZIP Code) US Army Chemical and Biological Defense Command ATTN: AMSCB-CII/Ed Gier Bldg E3330, Technical Library Aberdeen Proving Ground, MD 21010-5423		RECEIPT OF RECORDS Requester please sign, date and return this form, for file item(s) listed above, ONLY if the block to right has been checked by the Records Center. <input type="checkbox"/>
SIGNATURE		DATE