

DIRECTOR'S OFFICE SUSPENSE SLIP

Prepare response to:	Div/Ofc:
	Date forwarded:
cc:	Due date:
	Date mailed:
	Date to Gov:

bc:

Subject:

Prepare letter for:

<input type="checkbox"/> Director's signature	<input type="checkbox"/> Assistant Director's signature
<input type="checkbox"/> Governor's signature	<input type="checkbox"/> Chief's signature with reference to Director
<input type="checkbox"/> Director's signature with reference to Gov	<input type="checkbox"/> Chief's signature with reference to Gov

Response prepared by:	Date:
Returned for changes by:	Date:
Changes made by:	Date:

REQUIRED APPROVALS	APPROVED BY	DATE
<input type="checkbox"/> Chief		
<input type="checkbox"/> Deputy Director		
<input type="checkbox"/> Legal Services		
<input type="checkbox"/> Legislative Services		
<input type="checkbox"/> Other – Asst Dir		

Divisions/Offices: Forward suspense slip, original letter, response and appropriate envelopes to the Deputy Director's Office, Building D-3.