COORDINATION/BRIEFING SHEET
Blue Brief

Reset Form

SSIC/SERIAL NO.	FROM *(Dept/Code)*

SUBJECT

ROUTE	SYM	INIT	DATE OUT
00			
DTD			
01			

BACKGROUND/BRIEFING (*If required, list references and enclosures immediately below in naval letter format. It is not necessary to list references and enclosures to the basic document. Duplication of information contained in the attached document, or that inserted elsewhere on this sheet, should be avoided wherever practicable.)*

☐ CONTINUED ON PAGE _____

SIGNATURE	DATE

SYMBOLS

A ACTION
C COMMENT
I INFORMATION
R RETAIN
CF COPY FURNISHED
S SIGN

Reset Form

Print Form