PRESIDENTIAL LIBRARIES MANDATORY REVIEW REQUEST

MR NUMBER

FOR LIBRARY USE ONLY

SECTION I - PERSONAL DATA (SEE REVERSE)

NAME *(Last, First, Middile or Initial)*

ADDRESS *(Street, City, State, Zip Code) (Give Country if other than U.S.)*

INSTRUCTIONS

1. Limit the size of the total request to no more than 35 documents.
2. Provide as much info as is available in Sections I, II, and III.
3. Type or print clearly in black ink.
4. List items from ONE FOLDER ONLY on this form (use additional sheets whenever necessary).

PAGE OF PAGES

DATE RECEIVED

DATE COMPLETED

SECTION II - FILES DESCRIPTION

COLLECTION TITLE

BOX NUMBER

FOLDER TITLE

COMMENTS

FOR OFFICIAL USE ONLY

SECTION III - ITEM DESCRIPTION / SECTION IV - CLASSIFICATION/ACTION

DOCUMENT NUMBER	DOCUMENT TYPE	DOCUMENT SUBJECT/TITLE OR CORRESPONDENTS	DOCUMENT DATE	NUMBER OF PAGES	CLASSFIC-ATION	CLASSIFIER AND CONSULTING AGENCIES	ACTION TAKEN