

FROM: See return address on reverse.		DATE <i>28 Mar 79</i>
WRITER'S NAME/TELEPHONE NO. CPT BAKER, AV 221-0727/94		
☒ YOUR ☐ OUR COMMUNICATION (Kind, reference symbol, date, subject, or other identification) <i>LET, dtd. 15 Mar 79. Subj: Verification of Operational</i> <i>Rating Outing Code (TOFDC)</i> <i>RE: SLONIKER, Michael E., [REDACTED], MAJ.</i>		
ACTION TAKEN OR REQUESTED		
☐ REPLY WILL BE FURNISHED ON OR ABOUT _____ ☐ REQUEST DATE WHEN REPLY MAY BE EXPECTED _____ ☐ WE HAVE SENT YOUR COMMUNICATION TO (See below) _____		☒ RECEIPT ACKNOWLEDGED ☐ FOR DIRECT REPLY ☐ TO OBTAIN INFORMATION
<i>TOFDC is as follows: Master Review Board - 22 months</i> <i>(thru 30 Jun 74) + 31 months for period 750804-780220. TOTAL</i> <i>is 53 months as of 780220.</i>		
☐ OTHER INFORMATION ☐ SUPPLIED OR ☐ REQUESTED		
TYPED NAME, GRADE, AND TITLE BAKER, JAMES H., CPT, GS		SIGNATURE <i>James H. Baker</i>

DA FORM 209, 1 Jan 70 REPLACES EDITION OF
1 NOV 66, WHICH WILL
BE USED.

DELAY, REFERRAL, OR FOLLOW-UP NOTICE
(AR 340-15) GPO