FACSIMILE TRANSMITTAL HEADER SHEET

For use of this form, see AR 25-11; the proponent agency is ODISC4

COMMAND/ OFFICE	NAME/ OFFICE SYMBOL	OFFICE TELEPHONE NO. *(AUTOVON/Comm.)*	FAX NO. *(AUTOVON/Comm.)*
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REMARKS

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Please send the response to NYSDEC letter dated May 18, 1998.