

APPENDIX

**COPY REQUIREMENTS FOR DISTRIBUTION OF MATERIAL
TO ALL SUPERVISORS, SECRETARIES AND TYPISTS,
AND TO ALL EMPLOYEES**

Please indicate the number of copies needed by your organization (including Motor Carrier and Highway Safety personnel):

All Supervisors (includes team leaders and above):

All Secretaries and Typists:

All Employees:

Routing Code _____

Contact: _____
(name)

(phone)