

REQUEST FOR CHANGE OF ACTION OR EXTENDED DISTRIBUTION			1. TO N653 (Room 5A878)	2. DATE
3. ACTION REQUESTED		<input type="checkbox"/> EXTENDED DISTRIBUTION	<input type="checkbox"/> CHANGE ACTION OR COGNIZANCE AND <input type="checkbox"/> INCLUDE REQUESTOR IN INFOR DISTRIBUTION OR <input type="checkbox"/> DO NOT INCLUDE REQUESTOR IN RE-ISSUE DISTRIBUTION BUT RETURN THIS REQUEST WHEN REQUESTED ACTION HAS BEEN TAKEN	
		<input type="checkbox"/> ADDITIONAL COPIES		
4. MESSAGE IDENTIFICATION	ORIGINATOR	DATE TIME GROUP		MESSAGE CONTROL NO. (MCN)
5. REQUESTOR	OFFICE N	TYPED NAME UNDER SIGNATURE	RANK	PHONE
6. ACTION OR COG CHANGE	OFFICE N	ACCEPTED BY	RANK	PHONE
7. ADDITIONAL COPIES ARE REQUIRED BY				
8. EXTEND INTERNAL DISTRIBUTION TO				
COMM USE ONLY	RECEIVED	APPROVED	ACTION TAKEN	<input type="checkbox"/> MANUAL ROUTE
	TIME BY		TIME BY	<input type="checkbox"/> AUTO ROUTE

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