

TO: <i>(Requesting Agency)</i>	DATE
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- CONDUCT OF POLYGRAPH EXAMINATION IS AUTHORIZED.
- THIS CONFIRMS TELEPHONIC AUTHORIZATION GRANTED ON _____
- CONDUCT OF THE POLYGRAPH EXAMINATION IS NOT AUTHORIZED.
- PRIOR TO AUTHORIZATION, FURNISH THE FOLLOWING:

REMARKS

TYPED NAME, GRADE, POSITION OF AUTHORIZING REPRESENTATIVE	SIGNATURE OF AUTHORIZING REPRESENTATIVE
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