

MESSAGE FORM

(Tick as appropriate)

| | | | |
|----------|-----------|---------------|----------------------|
| Phone In | Phone Out | Verbal Report | Officers Information |
|----------|-----------|---------------|----------------------|

Number: 52.

From/To: SIO Direction.

Address: _____

Telephone *Home* _____ *Business* _____

Date: 4/5/05

Time: _____

Officer receiving/sending
D 1212
(Rank, name & number)

INFORMATION

Ⓐ Obtain & exhibit all IA & JB cases original medical certificate of cause of death and death certificates ^{certified copies} including Geoffrey RACHMAN (see statements of RASHMORE & SPRAGUE)

A 1578, 1579, 1580, 1581, 1582, 1583, 1584, 1585, A1586, 1587, 1588, 1589, 1590, 1591, 1592

Code A

| | |
|----------------------|------------------|
| Action: Yes/No _____ | Action Number(s) |
| Receiver | |

ANY FURTHER ACTION

| | | |
|--|-----------------|------------|
| | Officer Manager | Senior I/O |
|--|-----------------|------------|

Other References: