

TO: <i>(Requesting Agency)</i>	DATE
<p> <input type="checkbox"/> CONDUCT OF POLYGRAPH EXAMINATION IS AUTHORIZED. <input type="checkbox"/> THIS CONFIRMS TELEPHONIC AUTHORIZATION GRANTED ON _____ . <input type="checkbox"/> CONDUCT OF THE POLYGRAPH EXAMINATION IS NOT AUTHORIZED. <input type="checkbox"/> PRIOR TO AUTHORIZATION, FURNISH THE FOLLOWING: </p>	
REMARKS	
TYPED NAME, GRADE, POSITION OF AUTHORIZING REPRESENTATIVE	SIGNATURE OF AUTHORIZING REPRESENTATIVE