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| **DEPARTMENT:** | **NAME of RECORDS COORDINATOR** | **PHONE NUMBER** | **DATE:** |
| BOX # | **RECORD SERIES TITLE****Description & Function of Records** |  **FORMAT**Electronicor Paper | DISPOSITION AUTHORIZATIONNUMBER **(DAN #)**Found on Retention Schedule | **TRANSFER**TRANSFER DESTINATION: | DESTRUCTION DATE: | **DESTROY**DESTRUCTION METHOD(Shred Truck, In-Office Shred, Etc.) | **INCLUSIVE DATES of RECORDS** | **VOLUME** 1 ft3 per standard box(# of boxes) | **DATE**Task completed |
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