

Authorization for Destruction of Records

See the *Procedures for Destruction of Records* for instructions on how to complete this form.

Date:	Department:
То:	From:

The Records listed below have passed beyond the approved retention period.

Please list each type of record separately.

Classification Code	File/Records Description	Date Range	Destruction date



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Classification Code	File/Records Description	Date Range	Destruction date
Classification any litigation,	ese OFFICIAL RECORDS have passed the rete Scheme and Records Retention Schedule, and claim, negotiation, audit, or open records reques have been satisfied.	that there are no HC	LDS due to
Signature of De	partment Head Date		

The completed and signed Destruction Form must be retained by the Records Coordinator. A copy of the completed form may be kept by the department.

Date

Signature of Records Coordinator