RECORDS DISPOSAL REQUEST

To: SHELBY COUNTY PUBLIC RECORDS COMMISSION
980A NIXON DR.
MEMPHIS, TENNESSEE 38134
901-222-8175

No. For PRC Use Only

FROM THE OFFICE OF: _____ CONTACT: _____

ADDRESS: _____ TELEPHONE NO. _____

LOCATION OF RECORDS (include building and floor): _____

PLEASE COMPLETE THE FOLLOWING INFORMATION ON ITEMS 1 2 3 & 4

1 **DESCRIBE RECORD IN COMPLETE DETAIL, INCLUDING SERIES TITLE, DATES AND IF INDEXES ARE INCLUDED. PLEASE USE A SEPARATE DISPOSAL REQUEST ON EACH SERIES OF RECORDS.**

	CTAS #:	VOLUME	FROM	TO

2 **RECORD QUALITY / RETENTION PERIOD:**

- ☐ ORIGINAL – PERMANENT
- ☐ ORIGINAL – WORKING ___ YEAR RECORD
- ☐ ORIGINAL – TEMPORARY ___ YEAR RECORD
- ☐ DUPLICATE – WORKING ___ YEAR RECORD
  Original located:

3 **RECORD DISPOSITION:**

- ☐ DIGITAL
- ☐ MICROFILMED
- ☐ PAPER ONLY
- ☐ SCANNED

4 **APPROVAL**

- ☐ CONTINUING APPROVAL
- ☐ ONE-TIME APPROVAL

_____ _____ _____
DATE SIGNATURE TITLE

SUBSCRIBED AND SWORN TO BEFORE ME, THIS _____DAY OF_____20_____.

_____
NOTARY

NOTARY SEAL

_____
MY COMMISSION EXPIRES

THE ABOVE LISTED RECORDS HAVE BEEN REVIEWED AND ARE READY FOR DISPOSAL.

_____ _____
COUNTY ATTORNEY'S OFFICE DATE

☐ APPROVED ☐ REJECTED ☐ OTHER _____

_____ _____
PUBLIC RECORDS COMMISSION, CHAIRMAN DATE

_____ _____
PUBLIC RECORDS COMMISSION, SECRETARY DATE