**RECORDS SERVICE FORM**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date: | | | | | | | | Record Group # | | | |
| Records Officer/Authorized Agent: | | | | | | | | Department: | | | |
| Address: | | | | | | | | Division: | | | |
| Phone: | | | | | | | | Section: | | | |
| DELIVER RECORDS TO (Name / Physical Address): | | | | | | | | | | | |
| EMAIL RECORD(S) TO (Name/Email): | | | | | | | | | | | |
| RECORD(S) WILL BE PICKED UP BY AGENCY REPRESENTATIVE (Name): | | | | | | | | | | | |
|  | | | | | | | | | | |
| **ARCHIVES**  **USE ONLY**  **INQUIRY #** | **Storage**  **Facility**  **Box #** | **ARCHIVES USE ONLY**  **LOCATION** | **YOUR**  **AGENCY BOX #** | **Record Series Number** | | **YEAR**  **OF RECORDS** | | RECORD TITLE DESCRIPTION | | ***Storage Facility***  **Iron Mountain**  **Access Information Management**  **DE Public Archives** | |
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| RECORD(S) RECEIVED FROM THE DE PUBLIC ARCHIVES | | | | |  | | RECORD(S) RETURNED TO THE DE PUBLIC ARCHIVES | |  | | |
| SIGNATURE | | | | | DATE | | SIGNATURE | | DATE | | |

02/05/2019