



Certification of Records Destruction

1. COUNCIL/AGENCY/INDIVIDUAL		2. DIVISION/DEPARTMENT/SECTION	
3. PERSON COMPLETING FORM		4. LOCATION	5. PHONE

6. RECORDS TO BE DESTROYED				
Item Description	Date Received	Location Used	Destruction Method	Disposal Date

7. RECORDS DESTROYED BY <i>(Print)</i>	SIGNATURE	DATE
8. OEMS OFFICIAL <i>(Print)</i>	SIGNATURE	DATE