



**AGENCY NOTICE OF INTENT TO DESTROY RECORDS**

Name of Agency	Date Prepared	Date Received (leave blank)
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Name of Division	Phone Number
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Schedule or RDA Number	Series Number	Series Title	Inclusive Dates of Records	Volume Cubic Feet
EXAMPLE				

I hereby certify that for the above listed records, all state and federal audits have been completed, all applicable audit reports have been accepted and resolved by all applicable federal and state agencies and no legal actions are pending.

\_\_\_\_\_  
Signature of Agency Official

\_\_\_\_\_  
Title of Agency Official

\_\_\_\_\_ APPROVED

\_\_\_\_\_  
Signature of State Records Administrator or Designee

\_\_\_\_\_ DENIED

\_\_\_\_\_  
Date