SLC D575B State of Delaware Delaware Public Archives 121 Martin Luther King Jr. Blvd. North Dover, DE 19901
Phone # (302) 744-5000 *Email: AnalystTeam@state.de.us*

DESTRUCTION NOTICE

DEPT. RECORDS OFFICER REVIEW	DIV. RECORDS OFFICER REVIEW
Initial: _____ Date: _____	Initial: _____ Date: _____

DE PUBLIC ARCHIVES USE ONLY

JOB # _____

Reviewed By: _____ _____ _____ _____
Initials Date Initials Date

Date: _____

Department: _____ SLC # _____ Division: _____

Section: _____ Address: _____

Contact Person: _____ Phone: _____ Fax: _____

DESTRUCTION AUTHORIZATION IS REQEUSTED FOR THE FOLLOWING RECORDS:

☐ To be Destroyed/Discarded by the originating Agency. ☐ Method of Destruction: _____

☐ To be Destroyed by the Delaware Public Archives.

Record Group No.: _____

Schedule Series #	RECORD TITLE AND DESCRIPTION	Date Span of Records	Volume (Cu.Ft.)	Box # (s)	# Microfiche and/or Roll Numbers

COMMENTS: _____

APPROVALS AND CERTIFICATIONS

Records shall not be destroyed without the authorization of the State Archivist and Records Administrator or their designee.
Title 29 Delaware Code § 504(b).

I hereby certify that for the above described records, all federal, municipal, and state audits have been completed and all audit reports have been accepted and resolved and further that no legal actions are pending to which these records may be pertinent.

Authorized Signature: _____ Date: _____

I hereby give final approval to destroy the above described records:

State Archivist & Records Administrator: _____ Date: _____

DESTRUCTION AT AGENCY	DESTRUCTION AT DE PUBLIC ARCHIVES
I hereby certify that the above described records have been destroyed. (Send copy of this notice to DE Public Archives after destruction.)	I hereby certify that the above described records have been destroyed.
Records Officer/Authorized Agent Signature _____ Date _____	Delaware Public Archives Representative _____ Date _____

May 15, 2013