RECORDS DISPOSITION AUTHORIZATION – STATE AGENCIES



STATE OF CONNECTICUT Connecticut State Library Office of the Public Records Administrator 231 Capitol Avenue, Hartford, CT 06106 https://ctstatelibrary.org/publicrecords

Form RC-108 (Revised 12/2021)

AUTHORITY: State agencies in the Executive branch and certain quasi-public agencies must use this form to obtain approval for disposition (destruction or transfer) of public records in accordance with CGS §11-8a. All records proposed for disposition must be on an approved records retention schedule. If a record is not on a schedule, the record cannot be disposed; contact this office for further direction.											
See	Page 2 for instruct	ions. Send co	ompleted form by	email.							
STATE AGENCY:				DIVISION / UNIT:			RMLO EMAIL ADDRESS (for return of form):				
TYPE OF REQUEST – Indicate one and sign the associated certification statement below:											
IRANSFER		-	certify that the records listed below are to be transferred to another entity. After approval, legal title and custody of the records listed below will be transferred de name and address):								
	DESTRUCTION			ed below have met the retent ecords listed, in my opinion, p							
				DS CUSTODIAN (type or print): RECORDS CUSTODIAN SIGNATURE:			DATE SIGNED:	DATE SIGNED:		PHONE:	
RML	O (type or print):		JOB TITLE OF RMLO (type or print):		RMLO SIGNATURE:		DATE SIGNED:		PHONE:		
PI	ECORD SERIES NUMBEI	>				DATES OF RECORDS		VOLUME OF		PROPOSED DATE	
	. ADMIN-015 or DAS-01-00		RECORDS SERIES TITLE			FROM	THRU	RECORDS		OF DISPOSITION	
1.											
2.											
3.											
4.											
5.											
6.											
7.											
8.											
9.											
10.											
OFFICE USE ONLY — AUTHORIZATION EXCEPTIONS:								TOTAL VOLUME OF RECORDS			
										1	
APPROVED (Signature of State Archivist):				DATE SIGNED:	APPROVED (Signat	APPROVED (Signature of Public Records Administrator):			DATE SIGNED:		