

## Email completed forms to: <u>records@multco.us</u>

CONTROL NUMBER:	Please leave blank:	1) Department (or specify NON) and Ageno	ey information:
The following information	n can be obtained from	your retention schedule: https://multco.us/records/re	tention-schedules.
Refresher on Transferring Records to the Records Center: https://multco.us/file/10480/download			
2) Record Series Title: Plea	ase fill in the series title of the	Records you are sending us. List only one series or group of	3) Series Number:

records per transmittal.

The following informe	ution should be inclusive for all items being se	ent on this transmittal:
4) Total number of boxes:	5) Date range for all boxes:	6 Destruction date(s): Please leave blank

If you need labels, please check here	If you need a shelf inventory once shipment is
How many?	completed, please check here 🗌

The following information should be provided for each box:

Box Number	Beginning and Ending Contents (Examples: A – B; 100 – 150; Smith – Wheeler)	Beginning Date	Ending Date

Shipping Instructions – to be completed by Records Staff:

Boxes are Scheduled For Pick-up On \_\_\_\_\_ Shipping will be billed to m-code

Shipment is Less Than 11 Boxes. Please send 2 boxes per day through interoffice mail to 425/Records.

MAIL STOP	CONTACT PERSON	Tele Ext	Date
RECORDS MANAGEMENT 425 / RECORDS	RECORDS STAFF:	503-988-3741	Date

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