

# Transmittal Receipt Instructions

To help clarify the process of filling out the Transmittal Receipt, the Alaska Public Offices Commission (APOC) will be used as an example. The following instructions will go step-by-step through each of the applicable sections of the form. Should you have additional questions, please do not hesitate to contact the State Archivist, Ken Nail Jr., at (907) 465-2275 or [ken\\_nail@eed.state.ak.us](mailto:ken_nail@eed.state.ak.us).

No.	Type	Description	Example
1.	Department No.	2-digit code	02
2.	Department	Department Title	Administration
3.	Division	Division Title	APOC Division: in this example this field would be left blank since the commission is not part of a 3 tier system. For example, if The Alaska State Archives filled out a transmittal the Division listed should be Libraries, Archives, Museums.
4.	Section	Section Title	Alaska Public Offices Commission
5.	Physical Location of Records	Physical address of the building where the records are currently held	2221 E. Northern Lights Rm 128 Anchorage, AK 99508-4149
6.	Contact Name	First and Last Name of the primary contact for the records	Jane Smith
6A.	Phone Number	Phone number for the primary contact for the records	(907) 555-5555
6B.	Fax Number	Fax number for the primary contact for the records	(907) 555-5551
7A.	Series Title	Taken from the program records retention schedule or the general schedule under "Records Series Title Description"	Campaign Disclosure Statements
7B.	Inclusive Dates	Dates of the material. This field is to be used for the dates of the material only - not the current date.	1995-2005
7C.	Retention Schedule & Item No.	Taken from the program records retention schedule or the general schedule	23305/1
7D.	File Index, Code....available	Will the boxes be accompanied by a container list, file plan, or other reference information? Yes or No If Yes, include type.	Yes - Container List
7E.	General Series Description	Taken from the program records retention schedule or the general schedule under "Records Series Title Description". Be sure to include arrangement information if not included on the schedule (e.g., alphabetical, chronological, topical...)	This series consists of statements filed by candidates for state and municipal offices, and groups under provision of AS 15.13 and 2 AAC 50.
8.	Total Number of Containers	Number of boxes the Archives should expect to receive	50
9.	Format	Format of records. Check as many as apply.	Paper
10.	Restrictions on Use	Is any/all of this material restricted. If so, reference statute	No
11A.	Signature	Signature of authorized person with printed name and title	Signature and title of authorizing agent

**RECORDS RETENTION SCHEDULE CONTINUATION**

**SCHEDULE NUMBER** 23305

23305

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**Agency ID**

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**Retention**

**Disposition**

Item No.	Records Series Title and Description	Retention		Disposition			Remarks
		Office	Records Center	State Archives	Destroy	Vital Record	
1	<p><b>Campaign Disclosure Statements:</b></p> <p>This series consists of statements filed by candidates for state and municipal offices, and groups under provision of AS 15.13 and 2 AAC 50.</p> <p>Arranged alphabetically by name and thereunder chronologically by year.</p>	9	-	P	-		<p>Office of Record is the Anchorage office.</p> <p>Some data is input into DISCLOSE (Item15) &amp; APOC IQ (Item 16).</p> <p>Annual accural rate is approximately 5 cubic feet.</p>
2	<p><b>Conflict of Interest Statements &amp; Legislative Financial Disclosure:</b></p> <p>This series consists of statements filed by legislators and legislative directors, state officials, candidates for state office, under provision of AS 39.50.020, AS 24.60.200 and 2 AAC 50.</p> <p>Arranged alphabetically by name and thereunder chronologically by year.</p>	6	-	P	-		<p>Office of Record is the Anchorage office.</p> <p>Some data is input into the COI Log (Item 14).</p> <p>Annual accural rate is approximately 3 cubic feet.</p> <p>Municipal statements are retained for six years by the municipalities.</p>
3	<p><b>Statements of Contributions by Individuals or Businesses [Form 15-5]:</b></p> <p>This series consists of copies of statements filed by individuals regarding contributions to political campaigns under provision of AS 15.13.080 and 2 AAC 50.</p> <p>Arranged alphabetically by name of individual or business.</p>	6	-	-	6		<p>Office of Record is the Anchorage office.</p>



**STATE OF ALASKA**  
**Archives and Records**  
 Management Services  
 141 Willoughby  
 Juneau, AK 99801-1720  
 (907) 465-2270

# TRANSMITTAL/RECEIPT

## TRANSFER OF PUBLIC RECORDS TO THE ALASKA STATE ARCHIVES

### ARCHIVES USE ONLY

Accession No: 2005-

Date Rcd/By:

RG No:

SR No:

1. Dept. No.	2. Department	3. Division	4. Section
5. Physical Location of Records		6. Contact Name	6A. Phone No. 6B. Fax No.

### 7. DESCRIPTION OF RECORDS

7A. Series Title	7B. Inclusive Dates
7C. Retention Schedule & Item No.	7D. File index, code or manual available? <input type="checkbox"/> Yes <input type="checkbox"/> No TYPE:
7E General Series Description (Include information regarding content, order, etc.)	

### 8. Total Number of Containers Transferred to Archives:

### 9. Format of Records: (Check each type that applies)

- a.  paper documents
- b.  maps, blueprints, engineering drawings
- c.  bound volumes
- d.  photographs, slides, negatives
- e.  microforms
- f.  videotapes/motion pictures
- g.  audio tapes/cassettes
- h.  computer disks/magnetic tape
- i.  other \_\_\_\_\_

(Archives Use Only, Box Numbers)	Transfer List Number(s)
	Total Cubic Feet _____

Physical Condition of Records (Note damage or unusual wear)

### 10. Restrictions on Use

None  Yes. Cite applicable statute or regulations:

11. The above described public records are transferred to the official custody of the Alaska State Archives in accordance with the conditions shown on the reverse of this Transmittal/Receipt form (AS 40.21.020)

11A.. Transferring Agency: I authorize the transfer of records herein described.	11B. Alaska State Archives: I accept custody of records herein described.
Signature _____ Date _____	Signature _____ Date _____
Typed Name and Title	Typed Name and Title Ken Nail, Jr., Alaska State Archivist