

Field No.	Field Title	Instructions	Example
1	Department	Enter the name of your department	Education and Early Development
2	Dept. No.	Enter your departmental I.D. number	05
3	Division	Enter the name of your Division	Division of Libraries, Archives & Museums
4	Agency Name	Enter the name of your Agency	Alaska State Archives/Records & Information Management Service
5	Agency ID No.	Enter your Agency's I.D. number	524
6	Location of Records	Enter the physical address where the records are being held. <i>This is the physical address where the vendor will pick up the boxes containing the records.</i>	
7	Mailing Address	Enter the mailing address of your agency. <i>This should be your agency's billing address.</i>	
8	Records Officer	This field for your agency's Records Officer to complete. The Records Officer will type in their name after they review the RTL.	
9	Contact Person	Enter the name and title of the person who is handling the records transfer and filling out this form.	
10	Contact Person Email	Enter the email address of the contact person.	
11	Contact Person Phone No.	Enter the phone number of the contact person.	
12	RRDS No.	Enter the applicable Records Retention and Disposition Schedule ("RRDS") number.	05-524.1
13	Item No.	Enter the applicable item number/record series from the referenced RRDS.	001
14	Record Series Title	Enter a short/brief description of the records contained within the box. Please avoid acronyms, if possible.	Records Management Reference Requests
15	Inclusive Dates	Enter the inclusive dates covering all the records contained in the box from the earliest file date ("FROM" field) to the latest file date ("TO" field). Please use the <i>mm/dd/yyyy</i> date format when entering dates. NOTE- If the inclusive date is the same date (such as a case close date) please enter that date in both the "From" and "Thru" columns.	FROM 01/01/2010 TO 02/12/2017
16	Disposition Date	Enter the date the records are eligible for disposition. This is calculated as follows- take the "TO" end inclusive date from section 15 and add the retention period stated within the RRDS for the particular record series. Disposition dates should be calculated to the exact disposition date and <i>not</i> rounded up. Please use the <i>mm/dd/yyyy</i> date format when entering dates.	If inclusive dates in field 15 are 01/01/2010-02/12/2017 and the listed retention period is C+3, the Disposition Date would be 02/12/2020.
17	Agency Box/Reel No.	Enter any box or reel number (if microfilm) that your agency uses to identify the records being transferred. This field is optional.	
18	Records Center Barcode No.	Enter barcode number that the appropriate records center has given you for the box. Only one box/barcode per line. Please do not repeat barcodes on multiple lines. To obtain barcodes, contact the relevant records center directly. NOTE: <i>If you are transferring microform, please leave blank.</i>	

STATE OF ALASKA
 DEPARTMENT OF EDUCATION & EARLY DEVELOPMENT
 Alaska State Archives/Records & Information Management Service (ASA/RIMS)
 PO BOX 110571, Juneau, AK 99811-0571
 (907) 465-2317 or (907) 465-2276
rims@alaska.gov

For RIMS Use Only <i>(agencies please leave blank)</i>	
RTL No.	No. of Boxes/Reels
Page 1 of	DATE

INSTRUCTIONS *for* RECORDS TRANSFER LIST

1. DEPARTMENT	2. DEPT. NO.	3. DIVISION	4. AGENCY NAME	5. AGENCY ID NO.
6. LOCATION OF RECORDS (STREET ADDRESS)		7. MAILING ADDRESS		
8. RECORDS OFFICER	9. CONTACT PERSON	10. CONTACT PERSON EMAIL	11. CONTACT PERSON PHONE NO.	

Note: Access to records is restricted to authorized personnel in the above named Division.

	12. RRDS NO.	13. ITEM NO.	14. RECORDS SERIES TITLE <i>(enter a short/brief description of the records contained in each box)</i>	15. INCLUSIVE DATES		16. DISPOSITION DATE <i>mm/dd/yyyy</i>	17. AGENCY BOX/ REEL NO.	18. RECORDS CENTER BARCODE NO.
				FROM <i>mm/dd/yyyy</i>	THRU <i>mm/dd/yyyy</i>			
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