

TRANSFER MANIFEST

Agency - complete "white" areas. "Grey" area - for RMD use only.

**Arizona State Library, Archives and Public Records
Records Management Division**
1919 W. Jefferson, Phoenix 85009 (602) 926-3815
http://www.azlibrary.gov/records/pdf/Transfer_Manifest.pdf

AGENCY NAME		AGENCY CODE*			
ORG. UNIT NAME		UNIT CODE*			
ADDRESS					Phone # ()
CITY	AZ	ZIP	E-mail		
TOTAL NUMBER BOXES		BOX NUMBERS (Inclusive) 0000 thru			
List individual boxes if there is a break in numbers:					
SENDER NAME (PLEASE PRINT)		SIGNATURE		DATE	
		X			
RECORDS MGMT DIVISION		SIGNATURE		DATE	
		X			
0-10 MILES	10-30 MILES	MILES TRAVELED (Outside Maricopa. County)	TAPE EXCHANGE <input type="checkbox"/>	Description	

* See Agency's Records Retention Schedule (Agency Password)

May, 2006