

SCHEDULE OF RECORDS RETENTION AND DISPOSITION

(1) TO: _____ Records Commission _____ Telephone Number _____

 (address) (city) (zip code) (county)

(2) FROM: _____
 (political subdivision name) (unit)

 (signature of responsible official) (name) (title) (date)

(3) CERTIFICATION: I hereby certify that our records commission met in an open meeting, as required by Section 121.22 ORC, and passed the retention schedules contained on this form and any continuation sheets. I further certify that our commission will make every effort to prevent these record series from being destroyed, transferred, or otherwise disposed of in violation of this schedule and that no record will be knowingly disposed of which pertains to any pending case, claim, action or request. Further, any microfilm replacing a record listed on this schedule will conform to ANSI standards. This RC-2 was approved on _____ as reflected by the minutes kept by this commission.

Chairman, Records Commission:

 Signature Date

(4) Subject to selection upon receipt of a Certificate of Records Disposal (RC-3):

 For the Ohio Historical Society Date

Approved by the Ohio Auditor of State:

 For the Ohio Auditor of State Date

***SEPARATE ENTRIES SHOULD BE MADE FOR RECORDS WITH MORE THAN ONE MEDIA TYPE**

(5) (6) (7) (8)* (9)

Schedule Number	Record Title and Description	Retention Period	Media Type	For use by Auditor of State or OHS-LGRP