RMS ELECTRONIC MEDIA TRANSFER REQUEST

1. Agency No.	2. Schedule No.	3. Records Series No.	4. Records Series Title	5. Date Completed

6. Department	7. Division	8. Bureau

9. Person to Contact	10. Title	11. Telephone Number

12. Location of Records	13. Access Restriction	14. Retention Period	DISPOSITION CODES
			D-Destroy P-Permanent A-Archive

17. Agency Cartridge Number	18. Description of Media Contents (Year, Range)	15. Disposition		16. Electronic Media Vault Location Number
		Date	Code	

19. Received By 20. Title 21. Date Received 22. Remarks

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