

## INSTRUCTIONS FOR ELECTRONIC RECORDS TRANSMITTAL AND RECEIPT

1. Enter the proper department/division name as found in the Records Management Customer Listing.
2. Enter the date the form is being completed.
3. Enter the proper office/program name as found in the Records Management Customer Listing.
4. Enter the office's correct four digit customer billing number as found in the Records Management Customer Listing. Using the correct billing number is important in order for the correct agency to be billed for this service. This billing code also shows ownership of the records.
5. Enter the building name, and address. Field Offices, please enter your complete mailing address.
6. Individual completing the form, enter your name.
7. Enter the office telephone number.
8. Enter the ARMS number from the Red ARMS box label, which uniquely identifies each box.
9. Enter the records series name and number as it is listed the agency's Records Retention and Destruction Schedule. If you do not have the agency's current Records Retention and Destruction Schedule, please obtain a copy from your Records Officer.
10. Enter the record identifier (i.e., number or name) for the records being sent to storage. Limit entry to 10 characters.
  - 10A Record identifier for the first record in the box.
  - 10B Record identifier for the last record in the box.
11. Enter the record inclusive dates (time frame the records cover). Records Management uses the inclusive dates to verify the disposal date has been entered correctly. Limit entry to 8 characters.
12. Enter the R.D.B. Authority Number from the Records Retention and Destruction Schedule. Limit entry to six characters (for example 96-004).
13. Enter the disposal date of the records based on the retention set forth in the Records Retention and Destruction Schedule and the records inclusive dates. Records are destroyed in either January or July of each year (i.e. 01/2000).
14. Enter the exact number of boxes being transferred on this transmittal.
15. -19. Information is completed by Records Management.

Upon completing the information, e-mail this form using the standard agency abbreviation and transmittal date as e-mail subject, to BOA-RECMGT FRONT DESK. To ensure your boxes are picked up on Wednesday, this form must be received by Records Management before 3:30 on Tuesday.

Filing out the transmittal correctly assures the correct office will be charged for the storing of the records; ensures the records are maintained for the correct amount of time before being destroyed; assists the offices in identifying which records they have stored in each box; and makes it easier for the office to retrieve any records in the future.

After the boxes have arrived and are stored, Records Management will e-mail the completed form to you as your receipt. The agency should use the copy when making future referrals to the stored records.

If you have any questions or concerns, please feel free to contact Records Management at (605) 773-3589.

### **Box Requirements:**

**Maximum weight may not exceed 40 pounds.**

**Bottom of boxes are to be taped shut.**

**\*\*NOTE: THIS IS THE INSTRUCTION SHEET FOR ELECTRONIC TRANSMITTAL, NOT THE ACTUAL FORM USED TO SEND BOXES TO STORAGE.\*\***

<b>SOUTH DAKOTA RECORDS TRANSMITTAL AND RECEIPT</b>  <b>BOA State Records Management Program</b> <b>Electronic form revised 09/1999</b>	<b>Department/Division</b> <b>1</b>	<b>Transfer Date: (mm/dd/yyyy)</b> <b>2</b>
	<b>Office/Program</b> <b>3</b>	<b>Records Management Customer Number</b> <b>4</b>
<b>State Records Management Center</b> <b>104 South Garfield Avenue (East Highway 34 Bypass)</b> <b>c/o 500 East Capitol Avenue</b> <b>Pierre, SD 57501-5070 Telephone (605) 773-3589</b>	<b>Building Name and Floor or Room Number (Field Offices provide complete mailing address)</b> <b>5</b>	
	<b>Name (Individual completing this document)</b> <b>6</b>	<b>Telephone Number</b> <b>7</b>

**INSTRUCTIONS:** Obtain a copy of your Records Retention and Destruction Schedule Manual from your Department's Records Officer. If you do not know who your Records Officer is, call Records Management (RM) and we will assist you. Complete information and e-mail this form using the standard agency abbreviation and transmittal date as e-mail subject, to BOA-RECMGT FRONT DESK. To ensure your boxes are picked up on Wednesday, this form must be received by RM before 3:30 p.m. on Tuesday. We will arrange to have the boxes you list on this form picked up. Shaded areas on this form will be completed by RM and e-mailed to you as your receipt. Please use this receipt when calling for reference service to the stored records. **OBTAINING REFERENCE SERVICE:** You may obtain reference services to your records by telephoning RM at 773-3589, by accessing RM's RM02 mainframe application, by E-Mail (BOA-RECMGT REC RETRIEVALS), by FAX (773-5955) or by written request. **PLEASE REMEMBER: BOXES MUST NOT EXCEED 40 POUNDS GROSS WEIGHT.**

ARMS BOX NUMBER  (6 spaces)	RECORD CENTER			RECORD SERIES NUMBER AND NAME AS LISTED IN THE RECORD RETENTION AND DESTRUCTION SCHEDULE MANUAL (40 Characters) (What is in the box?)	CONTENTS				R.D.B. Authority Number  (5 Characters)	Disposal Date MM/YYYY  (6 Characters)
	Row	Shelf	Bin		ALPHABETIC OR NUMERIC		INCLUSIVE DATES			
					From (10 Characters) (i.e. Anderson)	To (10 Characters) (i.e. Olson)	From (8 Characters) (i.e. FY89)	To (8 Characters) (i.e. FY89)		
<b>8</b>	<b>15</b>	<b>15</b>	<b>15</b>	<b>9</b>	<b>10A</b>	<b>10B</b>	<b>11</b>	<b>11</b>	<b>12</b>	<b>13</b>

<b>TOTAL NUMBER OF BOXES</b>  <b>14</b>	<b>FOR RECORDS MANAGEMENT USE</b>			
	<b>Entered by/Date</b> <b>16</b>	<b>Number of Boxes Received</b> <b>17</b>	<b>Records Center Operator</b> <b>18</b>	<b>Date Stored:</b> <b>19</b> <b>/ /</b>