



CONTRACTOR RECORDS LISTING SHEET (TRANSMITTAL DOCUMENT)

COMPANY / AGENCY (legal name)	CONTRACT NO.	CONTRACTOR NAME (please print)
BOX NO. (start new page for each new box)	DATE OF TRANSFER (YYYY MMM DD)	CONTRACTOR SIGNATURE

CURRENT LOCATION OF RECORDS

Place files in box sequentially by FILE ID, TITLE OR CLIENT MNAME Identify media type (e.g., video, computer disks, microfilm/fiche if other than paper records)	DATE RANGE (YYYY MMM DD)	
	FROM	TO

MINISTRY USE ONLY

RECEIVING OFFICE AUTHORIZATION (REQUIRED FOR ALL TRANSFERS)

DISTRICT SUPERVISOR SIGNATURE	OFFICE CODE	DATE(YYYY MMM DD)
-------------------------------	-------------	-------------------