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| <b>REQUEST FOR RECORDS DISPOSITION AUTHORITY</b>  |   | JOB NUMBER<br>N1-462-09- 11   |  |
| TO: NATIONAL ARCHIVES & RECORDS ADMINISTRATION<br>8601 ADELPHI ROAD COLLEGE PARK, MD 20740-6001   |   | Date received<br>9/25/09  |  |
| 1 FROM (Agency or establishment)<br>U S. Department of Agriculture  |   | <b>NOTIFICATION TO AGENCY</b><br><br>In accordance with the provisions of 44 U S C 3303a, the disposition request, including amendments, is approved except for items that may be marked "disposition not approved" or "withdrawn" in column 10 |  |
| 2 MAJOR SUBDIVISION<br>Food and Nutrition Service   |   |   |  |
| 3 MINOR SUBDIVISION<br>Supplemental Nutrition Assistance Program  |   |   |  |
| 4. NAME OF PERSON WITH WHOM TO CONFER<br>Ricardo A. Romero <i>RAM</i>   | 5 TELEPHONE NUMBER<br>(703) 305-2570                                  | DATE<br>12 Oct 10   | ARCHIVIST OF THE UNITED STATES<br><i>[Signature]</i> |
| 6 AGENCY CERTIFICATION<br>I hereby certify that I am authorized to act for this agency in matters pertaining to the disposition of its records and that the records proposed for disposal on the attached _____ page(s) are not needed now for the business for this agency or will not be needed after the retention periods specified, and that written concurrence from the General Accounting Office, under the provisions of Title 8 of the GAO Manual for Guidance of Federal Agencies,<br><br><input checked="" type="checkbox"/> is not required <input type="checkbox"/> is attached, or <input type="checkbox"/> has been requested |   |   |  |
| DATE<br>9/22/09   | SIGNATURE OF AGENCY REPRESENTATIVE<br><i>[Signature]</i>              |   | TITLE<br>Agency Records Officer                      |
| 7 ITEM NO   | 8 DESCRIPTION OF ITEM AND PROPOSED DISPOSITION                        | 9 GRS OR SUPERSEDED JOB CITATION  | 10 ACTION TAKEN (NARA USE ONLY)                      |
|   | SEE ATTACHED<br><br>FSQCS – Food Stamp Quality Control System (FSQCS) |   |  |

| 7 ITEM NO | 8 DESCRIPTION OF ITEM AND PROPOSED DISPOSITION   | 9 GRS OR SUPERSEDED JOB CITATION | 10 ACTION TAKEN (NARA USE ONLY)   |
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|           | <p><b>Title:</b> Food Stamp Quality Control System (FSQCS)</p> <p><b>Agency:</b> U.S. Department of Agriculture (USDA), Food and Nutrition Service (FNS)</p> <p><b>Office:</b> Supplemental Nutrition Assistance Program (SNAP), Program Accountability and Administration Division (PAAD)</p> <p><b>NARA Disposal Authority:</b></p> <p>This schedule authorizes the disposition of the record copy in any media (media neutral). Records designated for permanent retention must be transferred to the National Archives in accordance with NARA standards at the time of transfer.</p> <p><b>Description:</b></p> <p>The purpose of FSQCS is to give the States a vehicle to transmit their State SNAP Quality Control (QC) data to a central Federal data base. The FSQCS process begins when State data is entered into the system by State data entry personnel. The FSQCS software performs data transmission files, and allows conduct of a variety of data manipulations for the analysis of error rates in the payment of SNAP benefit dollars.</p> <p>This system is used to store case information about a sample of household that participate in Supplemental Nutrition and Assistance Program (SNAP). The FSQCS is used to collect and process household data for FNS.</p> <p><b>Disposition Instructions:</b></p> <p><del>Item 1. Input.</del></p> <p><del>The data is collected by State reviewers by filling out</del></p> |                                  | <p>FSQCS replaces legacy system NIOCS covered under FNS Code 77, "National Integrated Quality Control System," authorized under N1-462-95-4</p> |

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|  | <p><del>FNS Forms 380-1 for active cases and 245 for negative cases. These forms are then forwarded as batch file to State data entry personnel who enter the data into the FSQCS system.</del></p> <p><b>Electronic:</b></p> <p><del><b>Temporary.</b> Delete when data have been entered into the master file or database and verified, or when no longer required to support reconstruction of, or serve as backup to, a master file or database, whichever is later.</del></p> <p><b>Paper:</b></p> <p><del><b>Temporary.</b> Destroy after the information has been converted to an electronic medium and verified, when no longer needed for legal or audit purposes or to support the reconstruction of, or serve as backup to, the electronic records.</del></p> <p><b>Item 2: <u>Master file/database.</u></b></p> <p>The master file/database contains case information about a sample of households that participate in the Supplemental Nutrition and Assistance Program (SNAP). The FSQCS is used to collect and process household data for FNS. The system does not store personal data.</p> <p><b>Permanent. Transfer a copy of the database in an approved NARA format (ASCII, flat file) immediately after approval of this schedule. Thereafter, transfer a copy of database in accordance with NARA specifications at the end of the calendar year.</b></p> <p><b>Item 3: <u>Outputs and Reports.</u></b> (Item 3a. is only requesting a reduction in retention from 10 to 5 years.)</p> <p>a. Record copy of Annual Quality Control Report (Quality Control Section).</p> | <p>GRS 20, 2(b)(c)</p> <p>GRS 20, 2a(4)</p> <p>Authority -N1-462-95-4</p> | <p>Agency concurred to reduction from 10 to 5 years - 9/21/2010.</p> |
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