REQUEST FOR RECORDS DISPOSITION AUTHORITY (See Instructions on reverse)				JOB NO. NC1-440-85-2		
					ATION TO AGENCY	
Health Care Financing Administration  2 MAJOR SUBDIVISION Administrative				In accordance with the provisions of 44 U.S.C. 3303a the disposal request, including amendments, is approved		
Office of Management Services  3. MINOR SUBDIVISION				except for items that may be marked "disposition not approved" or "withdrawn" in column 10 If no records are proposed for disposal, the signature of the Archivist is not required		
Recor	FTS			VIST OF THE UN	R &	
Reba D. Henighan 6. CERTIFICATE OF AGENCY REPRESENTATIVE		934-8712			CON CON	( ww
that the reco	cify that I am authorized to act for this agenords proposed for disposal in this Request of ill not be needed after the retention period of the provisions of courrence is attached, or is unnecessary.	of 1 ods specified Title 8 of the	page(s , and	s) are not now need that written concu	ed for the bu irrence from	siness of this the General
	C. SIGNATURE OF AGENCY REPRESENTATIVE		*·*· F			
3/25/85	Dr. George Deal		epart	ment Records Ma	anagement (	)fficer
7 ITEM NO	8 DESCRIPTION . (With Inclusive Dates or I		)		9 GRS OR SUPERSEDED JOB CITATION	10 ACTION TAKEN (NARS USE ONLY)
脬 1.	Medicare Beneficiary Correspondence Files			les	NCI-440-	
	Those files that accumulate as a result of inquiries and complaints received by Central Office, Regional Offices, and intermediaries and carriers and dom not include any correspondence that is related to a claim file.					
	Disposition: Destroy 3 months after the date of the resto the correspondence. If a response is not required, the material will be destroyed three months after the date correspondence.					
						,
						1 item