

**REQUEST FOR RECORDS DISPOSITION AUTHORITY**  
(See Instructions on reverse)

TO NATIONAL ARCHIVES and RECORDS ADMINISTRATION (NIR)  
WASHINGTON, DC 20408

1 FROM (Agency or establishment)  
Department of Health and Human Services

2 MAJOR SUBDIVISION  
Public Health Service

3 MINOR SUBDIVISION  
Centers for Disease Control and Prevention

4 NAME OF PERSON WITH WHOM TO CONFER  
*Robert J. Barnes, Sr.*  
Dir, Div Systems Mgmt & Improvement

5. TELEPHONE  
301 443-2004

**LEAVE BLANK (NARA use only)**

JOB NUMBER  
*N1-442-95-1*

DATE RECEIVED  
*3-2-95*

NOTIFICATION TO AGENCY

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request, including amendments, is approved except for items that may be marked "disposition not approved" or "withdrawn" in column 10

DATE for ARCHIVIST OF THE UNITED STATES  
*3/8/95* *James E. [Signature]*

6 AGENCY CERTIFICATION

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 2 page(s) are not now needed for the business of 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,

is not required;  is attached; or  has been requested.

DATE  
*FEB 21 1995*

SIGNATURE OF AGENCY REPRESENTATIVE  
*Robert J. Barnes, Sr.*  
A Prentice Barnes, Sr.

TITLE  
DHHS Records Management Officer

7 ITEM NO	8. DESCRIPTION OF ITEM AND PROPOSED DISPOSITION	9. GRS OR SUPERSEDED JOB CITATION	10 ACTION TAKEN (NARA USE ONLY)
	<p><u>Forms Management Files:</u></p> <p>These files consist of a camera-ready copy of CDC forms maintained in the Management Analysis and Services Office (MASO), Office of Program Support. The purpose of this request is to revise the disposition of these forms from permanent to a retention period of 10 years. The forms relate to administration, programmatic research, surveillance, and a variety of scientific and technical data collections. These blank forms are managed by MASO to ensure compliance with CDC policy and for printing and distribution purposes. The vast majority of these forms are routine in nature and are not permanently</p> <p><i>Changes to this schedule were approved by Jimmy Harrison per phone conversation 02/02/95. [Signature]</i></p>	<p>CDC Records Control Schedule B-321, Item 1-13a</p> <p><i>and GRS 16, Item 3</i></p>	

*per 5/2/03 email from CDC - (Morg) dha*

*Copies sent to agency, NCF 3/9/95*

REQUEST FOR RECORDS DISPOSITION AUTHORITY — CONTINUATION

JOB NUMBER

PAGE

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7  
ITEM  
NO

8 DESCRIPTION OF ITEM AND PROPOSED DISPOSITION

9 GRS OR  
SUPERSEDED  
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TAKEN (NARA  
USE ONLY)

valuable. However, this schedule does not cover specific data input forms detailed under Part 4, "Electronic Records Systems" of the CDC Records Control Schedule, B-321. In all but one records system (HIV/AIDS Surveillance Data Base) the forms have been appraised as not having permanent historic value. Programs will notify CDC Forms Officer of all forms which are obsolete.

Authorized Disposition:

Cut off obsolete forms at the end of the calendar year. Transfer to FRC 2 years after cut off. Destroy when 10 years old.

Approvals:

 date 2/2/95  
Jimmy A. Harrison  
CDC Records Officer