REQUEST FOR RECORDS DISPOSITION AUTHORITY
(See Instructions on reverse)

TO GENERAL SERVICES ADMINISTRATION,
NATIONAL ARCHIVES AND RECORDS SERVICE, WASHINGTON, DC 20408

1 FROM (AGENCY OR ESTABLISHMENT)
   DEPARTMENT OF JUSTICE

2 MAJOR SUBDIVISION
   BUREAU OF PRISONS

3 MINOR SUBDIVISION
   MCNEIL ISLAND

4 NAME OF PERSON WITH WHOM TO CONFER
   THOMAS E. WILLIAMS

5 TEL EXT
   FTS
   724-5998

6 CERTIFICATE OF AGENCY REPRESENTATIVE

I hereby certify that I am authorized to act for this agency in matters pertaining to the disposal of the agency's records, that the records proposed for disposal in this Request of the page(s) are not now needed for the business of this agency or will not be needed after the retention periods specified.

☐ A Request for immediate disposal.

☐ B Request for disposal after a specified period of time or request for permanent retention.

C. DATE
   12-10-82

D SIGNATURE OF AGENCY REPRESENTATIVE
   [Signature]

E. TITLE
   CHIEF, DOCUMENTS CONTROL

7 ITEM NO

8 DESCRIPTION OF ITEM
   (With Inclusive Dates or Retention Periods)

9 SAMPLE OR JOB NO

10 ACTION TAKEN

1. See attached SF 135's in re accessions 129-81-0077, 0078 and 0079. These records are from Alcatraz and were forwarded to McNeil Island for storage. The records were deposited in the Seattle FRC when McNeil closed. These records continue to have research value to the Federal Prison System. The listed records are very closely related to the inmate records contained in NCI-129-77-4, which are scheduled for disposal 1-1-20205. The listed records should also be retained until 1-1-2025.

STANDARD FORM 115
Revised April, 1975
Prescribed by General Services Administration
FPMR (41 CFR) 101-114

MASS DATA CHANGE SHEET NOT REQUIRED

10KR, NNF & Agency sent 1-31-83 by Dmol.
RDS - TRANSMITTAL AND RECEIPT

Complete and send original and two copies of this form to the appropriate Federal Records Center for approval prior to shipment of records. See specific instructions on reverse.

**1. TO**

(Check the address for the appropriate records center serving your area)

Federal Archives and Records Center
General Services Administration

**2. AGENCY TRANSFERRING AGENCY OFFICIAL (Signature and title)**

(As shown in FPMR 101-11 110-1)

*Dr. D. Gray, Superintendent*

02/03/81

**3. AGENCY CONC.**

(Enter the name and complete mailing address of the office returning the records. The signed receipt of this form will be sent to this address)

Federal Prison Camp
Post Office Box 500
McNeil Island
Steilacoom, Washington 98388

**4. RECORDS RECEIVED BY**

(Signature and title)

**5. FROM**

(Enter the name and complete mailing address of the office returning the records. The signed receipt of this form will be sent to this address)

Job No. NCI-129-83-6, Page 2

**RECORDS DATA**

<table>
<thead>
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<th>ACCESSION NUMBER</th>
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<tbody>
<tr>
<td>RG</td>
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| 179 | SI 069 | 1 Only | Alcatraz Employee Pay Cards
| Pay Cards, FY 1948 thru Analysis of Personal Services |

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Standard Form 135 (Rev. 6-76)
Prescribed by GSA
FPMR (41 CFR) 101-11.4
**RECORDS TRANSMITTAL AND RECEIPT**

Complete and send original and two copies of this form to the appropriate Federal Records Center for approval prior to shipment of records. See specific instructions on reverse.

1. **TO**
   - Federal Archives and Records Center
     General Services Administration
     [Address]

2. **AGENCY TRANSFERRING**
   - **AGENCY OFFICIAL** (Signature and title): [Signature]
     [Name and title]
   - **DATE**: 02/03/81

3. **AGENCY CONTACT**
   - **TRANSFERRING AGENCY OFFICIAL** (Name, office and telephone number): [Signature]
     [Name and title]
     [Telephone number]
   - **DATE**: [Date]

4. **RECORDS CENTER RECEIPT**
   - **RECORDS RECEIVED BY** (Signature and title): [Signature]
     [Name and title]
   - **DATE**: [Date]

5. **FROM**
   - [Signature]
   - [Name and title]
   - [Address]

**RECORDS DATA**

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<tr>
<th>ACCESSION NUMBER</th>
<th>AGENT BOX NUMBERS</th>
<th>SERIES DESCRIPTION</th>
<th>RESTRICTION</th>
<th>DISPOSAL AUTHORITY</th>
<th>DISPOSAL DATE</th>
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<td>VOLUME (c or f)</td>
<td>AGENCY BOX NUMBERS (d)</td>
<td>SERIES DESCRIPTION (With inclusive dates of records)</td>
<td>RESTRICTION (e)</td>
<td>DISPOSAL AUTHORITY (Schedule and item number) (g)</td>
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<td>51</td>
<td>0676</td>
<td>1 thru 2</td>
<td>Alcatraz Employee Payroll Records, 01/12 - 06/28/58</td>
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<td>thru Statements of Transactions, 01/60 to 06/1960</td>
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