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)
   Veterans Administration

2. MAJOR SUBDIVISION
   Department of Veterans Benefits

3. MINOR SUBDIVISION
   Field Station

4. NAME OF PERSON WITH WHOM TO CONFER
   MARJORIE M. LEANDRI

5. TEL. EXT
   389-3632

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 1 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
      7/12/84

   D. SIGNATURE OF AGENCY REPRESENTATIVE
      DAVID N. STONE

   E. TITLE
      Director, Paperwork Management and Regs. Svc.

   7. ITEM NO.

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

   9. SAMPLE OR JOB NO.

   10. ACTION TAKEN

<table>
<thead>
<tr>
<th>ITEM NO.</th>
<th>DESCRIPTION OF ITEM</th>
<th>ACTION TAKEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Actuarial computer printouts, such as Actuarial Installment Claims Reports, Actuarial Reopened National Service Reports, Actuarial K Reports, W Conversion Study and Dividend Reports. Transfer to inactive file when 4 years old; destroy when 10 years old.</td>
<td>NEW</td>
</tr>
</tbody>
</table>

2 ITEMS

copies sent to agency + NNM