

**REQUEST FOR AUTHORITY
 TO DISPOSE OF RECORDS**

(See Instructions on Reverse)

Item

RE 47

TO: GENERAL SERVICES ADMINISTRATION,
 NATIONAL ARCHIVES AND RECORDS SERVICE, WASHINGTON, D.C. 20408

| LEAVE BLANK | |
|-------------------------------------|-----------------------|
| DATE RECEIVED SEP 13 1974 | JOB NO |
| DATE APPROVED | NC - 47-75 - 2 |

1 FROM (AGENCY OR ESTABLISHMENT)
Department of Health, Education, and Welfare

2 MAJOR SUBDIVISION
Social Security Administration

3. MINOR SUBDIVISION
Bureau of Data Processing

4. NAME OF PERSON WITH WHOM TO CONFER
Charles D. Smith

5. TEL. EXT.
594-5772

NOTIFICATION TO AGENCY

In accordance with the provisions of 44 U.S.C. 3303a the disposal request, including amendments, is approved except for items that may be stamped "disposal not approved" or "withdrawn" in column 10.

10-4-74 *Walter Roberts Jr.*
 Date, Archivist of the United States
acting

6. CERTIFICATE OF AGENCY REPRESENTATIVE

I hereby certify that I am authorized to act for the head of this agency in matters pertaining to the disposal of records, and that the records described in this list or schedule of _____ pages are proposed for disposal for the reason indicated: ("X" only one)

- A The records have ceased to have sufficient value to warrant further retention.
- B The records will cease to have sufficient value to warrant further retention on the expiration of the period of time indicated or on the occurrence of the event specified.

9/10/74 *for Eugene J. Reed Jr.*
 (Date) Russell O. Hess
 (Signature of Agency Representative)

Dept. Records Mgt. Officer
 (Title)

| 7. ITEM NO | 8 DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9 SAMPLE OR JOB NO. | 10 ACTION TAKEN |
|------------|--|---------------------|-----------------|
| | <p><u>SSI Conversion Data Forms</u></p> <p>These are forms submitted to the Social Security Administration by the States and counties to provide data on welfare recipients eligible for conversion to Supplemental Security Income (SSI) benefits. Included are Forms SSA-2670, Status Change Request, SSA-2671, Conversion Data Record; or their equivalents. Data is extracted from these forms and entered into a magnetic tape file.</p> <p>Destroy 6 months after data has been entered into the magnetic tape file.</p> | | |

Agency Copy Hand-delivered by P.L. D 10/10/74