

Rec'd NCD 9M-07 17 79

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

LEAVE BLANK	
JOB NO	
Nc1-47-79-9	
<del>DATE RECEIVED</del>	
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disposal request, including amendments, is approved except for items that may be stamped "disposal not approved" or "withdrawn" in column 10	
3-16-79 Date	<i>James P. Plouffe</i> Archivist of the United States

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

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

2. MAJOR SUBDIVISION  
**Social Security Administration**

3. MINOR SUBDIVISION  
**Office of Management, Budget, and Personnel**

4. NAME OF PERSON WITH WHOM TO CONFER

**Ernest P. Lardieri**

5. TEL EXT

**594-5770**

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 3/6/79	D. SIGNATURE OF AGENCY REPRESENTATIVE <i>Ernest P. Lardieri</i>	E. TITLE <i>Asst. Dir. of Mgmt. &amp; Pers.</i>
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7. ITEM NO	8. DESCRIPTION OF ITEM (With Inclusive Dates or Retention Periods)	9. SAMPLE OR JOB NO.	10. ACTION TAKEN
1.	<p align="center"><b><u>RECORDS RETENTION AND DISPOSAL SCHEDULE</u></b> <b><u>MEDICAL CERTIFICATES AND SUPPORTING PAPERS</u></b></p> <p>Files consisting of medical certificates or other supporting papers signed by a physician and submitted to SSA management by an employee in accordance with the Personnel Guide for Supervisors (Chapter IV, Guide 5-1, Appendix E, Management of Leave, Medical Certificates) to justify use of sick leave. The physician certification may be contained on physician stationary (i.e., note pad or prescription form) or on other types of documents, such as the reverse of the SF-71, Application for Leave. If it is shown on the reverse of this form, the SF-71 should be maintained for the longer retention period, either as a leave application document or medical certificate.</p> <p>Destroy when 1 year old.</p>		

*Copy Sent to Agency 3-22-79: K.T.H.*