

*Returned for signature* *Rec'd NCV 10/11/79* *Rec'd NCV 5/24/79*

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

|                                                                                                                                                                                                      |                                                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| LEAVE BLANK                                                                                                                                                                                          |                                                          |
| JOB NO.<br>NC1-47-79-19                                                                                                                                                                              | <del>XXXXXXXXXX</del>                                    |
| DATE RECEIVED<br>9/5/79                                                                                                                                                                              | <del>XXXXXXXXXX</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the disposal request, including amendments is approved except for items that may be stamped "disposal not approved" or "withdrawn" in column 10 |                                                          |
| 9-13-79<br>Date                                                                                                                                                                                      | <i>James E. O'Neil</i><br>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 Central Operations

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 2 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<br><u>8/29/79</u> | D. SIGNATURE OF AGENCY REPRESENTATIVE<br><i>Ernest P. Lardieri</i> | E. TITLE<br><i>SSA Records Officer</i> |
|---------------------------|--------------------------------------------------------------------|----------------------------------------|

| 7. ITEM NO | 8. DESCRIPTION OF ITEM<br>(With Inclusive Dates or Retention Periods)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 9. SAMPLE OR JOB NO | 10. ACTION TAKEN |
|------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|------------------|
|            | <p><u>Redetermination Case Control Cards</u></p> <p>Computer-generated punchcards used to control internal redetermination processing and the transfer of cases to district office (DO), if necessary, for further development. Cards are also used as an analytical tool to identify problem areas for projection of further workloads and trends. Information on the card consists of case identification information.</p> <p>Destroy 6 months after case is completed or transferred to DO.</p> <p><u>Redetermination Transmittal Form</u></p> <p>Form SSA-3951U2, SSI Redetermination Transmittal, or its equivalent, used to forward low probability redeterminations to DOs for further development. A copy is retained by central operations for statistical studies. These studies may be short-term (i.e., monthly) or long-term (i.e., annually). Information on the form consists of receipt identification information, reason for transfer, and data processing disposition.</p> <p><i>CC: NNF 9-8-79 2 items</i></p> |                     |                  |

*Copy sent to agency 9-18-79*

# INSTRUCTIONS

## General Instructions:

Use Standard Form 115 (obtainable from supply depots of the Federal Supply Service, General Services Administration) and the continuation sheet Standard Form 115a (obtainable from the Records Disposition Division, Office of Federal Records Centers, National Archives and Records Service, Washington, D.C. 20408) to obtain authority to dispose of records or to request permanent retention of records. Detach the fifth copy from the set and keep as your reference copy. Submit the first four copies of the set to the National Archives and Records Service. One copy will be returned to the agency as notification of items that are authorized for disposal. Items withdrawn or not approved for disposal will be so marked. Each SF 115 requiring Comptroller General concurrence must be accompanied by a notification of approval from GAO.

## Specific Instructions:

*Entries 1, 2, and 3* should show what agency has custody of the records that are identified on the form, and should contain the name of the department or independent agency, and its major and minor subdivisions.

*Entries 4 and 5* should help identify and locate the person to whom inquiries regarding the records should be directed.

*Entry 6* should be signed and dated on the four copies by the agency representative. The number of pages involved in the request should be inserted.

Box A should be checked if the records may be disposed of immediately. Box B should be checked if continuing disposal authority is requested or if permanent retention is requested. Only one box may be checked.

*Entry 7* should contain the numbers of the items of records identified on the form in sequence, i.e., 1, 2, 3, 4, etc.

*Entry 8* should show what records are proposed for disposal.

Center headings should indicate what office's records are involved if all records described on the form are not those of the same office or if they are records created by another office or agency.

An identification should be provided of the types of records involved if they are other than textual records, for example, if they are photographic records, sound recordings, or cartographic records.

An itemization and accurate identification should be provided of the series of records that are proposed for disposal or retention. Each series should comprise the largest practical grouping of separately organized and logically related materials that can be treated as a single unit for purposes of disposal. Component parts of a series may be listed separately if numbered consecutively as 1a, 1b, etc., under the general series entry.

A statement should be provided showing when disposal is to be made of the records, thus:

If immediate disposal is requested of past accumulations of records, the inclusive dates during which the records were produced should be stated.

If continuing disposal is requested for records that have accumulated or will continue to accumulate, the retention period may be expressed in terms of years, months, etc., or in terms of future actions or events. A future action or event that is to determine the retention period must be objective and definite. If disposal of the records is contingent upon their being microfilmed, or otherwise reproduced or recorded on machine readable media, the retention period should read: "Until ascertained that reproduced copies or recordings have been made in accordance with GSA regulations and are adequate substitutes for the paper records." Also, the provisions of FPMR § 101-11.5 should be observed.

*Entry 9* should be checked if samples are submitted for an item. However, samples of the records are not required unless they are requested by the NARS appraiser. If an item has been previously submitted, the relevant job and item number should be entered.

*Entry 10* should be left blank.

  
\_\_\_\_\_  
SSA Records Officer

**Request for Records Disposition Authority – Continuation**

JOB NO

PAGE OF 2  
2

| 7.<br>ITEM NO | 8. DESCRIPTION OF ITEM<br>(With Inclusive Dates or Retention Periods)                                                                                                                                     | 9.<br>SAMPLE OR<br>JOB NO | 10.<br>ACTION TAKEN |
|---------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|---------------------|
|               | <p><u>DO Copy</u></p> <p>Destroy after completion of redetermination action.</p> <p><u>Central Operations Copy</u></p> <p>Destroy after completion of study or when 6 months old, whichever is later.</p> |                           |                     |