

| REQUEST FOR RECORDS DISPOSITION AUTHORITY <i>(See Instructions on reverse)</i> | | LEAVE BLANK (NARA use only) | |
|--|---|--|----------------------------------|
| TO: NATIONAL ARCHIVES and RECORDS ADMINISTRATION (NIR) WASHINGTON, DC 20408 | | JOB NUMBER <i>11-184-93-7</i> | |
| 1. FROM (Agency or establishment) Railroad Retirement Board (RRB) | | DATE RECEIVED <i>3-22-93</i> | |
| 2. MAJOR SUBDIVISION Bureau of Information Resources Management | | NOTIFICATION TO AGENCY In accordance with the provisions of 44 U.S.C. 3303a the disposition request, including amendments, is approved except for items that may be marked "disposition not approved" or "withdrawn" in column 10. | |
| 3. MINOR SUBDIVISION | | | |
| 4. NAME OF PERSON WITH WHOM TO CONFER 5. TELEPHONE Chuck Mierzwa (312) 751-3363 | | | |
| 6. AGENCY CERTIFICATION I hereby certify that I am authorized to act for this agency in matters pertaining to the disposition of its records and that the records proposed for disposal on the attached _____ page(s) are not now needed for the business of this agency or will not be needed after the retention periods specified; and that written concurrence from the General Accounting Office, under the provisions of Title 8 of the GAO Manual for Guidance of Federal Agencies, | | DATE ARCHIVIST OF THE UNITED STATES <i>11-30-93</i> <i>Andy Huskamp Peterson</i> | |
| <input type="checkbox"/> is not required; <input type="checkbox"/> is attached; or <input checked="" type="checkbox"/> has been requested. | | | |
| DATE MAR 18 1993 | SIGNATURE OF AGENCY REPRESENTATIVE <i>Chuck Mierzwa</i> Chuck Mierzwa | TITLE Agency Records Officer | |
| 7. ITEM NO. | 8. DESCRIPTION OF ITEM AND PROPOSED DISPOSITION | 9. GRS OR SUPERSEDED JOB CITATION | 10. ACTION TAKEN (NARA USE ONLY) |
| 12-21 <i>1</i> | <u>Sickness Benefits Tier I Tax Report File</u> Series consists of copies of reports of sickness benefits subject to Tier I Railroad Retirement taxes. Includes copy of accompanying transmittal letter to railroad employer. <u>Proposed Disposition</u> Destroy 6 years and 3 months after the benefit year covered by the report. | New Item <i>(12-21)</i> | |
| 12-22 | Input Transaction Details Microfiche Microfiche record produced from magnetic tape used to document input details to the daily RUIA claims processing system. | New Item <i>withdrawn</i> | |
| <i>Copies sent to Agency 12/10/93</i> | | | |

REQUEST FOR RECORDS DISPOSITION AUTHORITY — CONTINUATION

JOB NUMBER

PAGE

OF

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|-------------------|---|---|--|
| | <p>(a) Magnetic tape file.</p> <p>(b) Microfiche.</p> <p><u>Proposed Disposition</u></p> <p>(a) Destroy upon verification and acceptance of microfiche.</p> <p>(b) Destroy 6 years and 3 months after the end of the benefit year in which created.</p> | | |