

<b>1. Administration/College</b> College of Dentistry	<b>2. Department/Office/Program</b> Restorative Dental Sciences
<b>3. Mailing Address/P.O. Box</b> 100415	<b>4. Contact (Name &amp; Telephone or Email)</b> Sam Smith / 555-5555
<b>5. Method of Disposal</b> The record series listed in Box 7 are to be disposed of in the manner indicated below. <b>Only one option may be selected per form.</b>  <input checked="" type="checkbox"/> a. Destroy <input type="checkbox"/> b. Scan & Destroy <input type="checkbox"/> c. Transfer to UF Archives <input type="checkbox"/> d. Other Method (please specify below):	<b>6. Submitted and Authorized By:</b> I certify that the records to be disposed of are correctly represented, that any audit requirements for the records have been fully justified, and that further retention is not required for any litigation pending or imminent.  <div style="text-align: right;">  _____                      Signature <span style="float: right;">7/16/2022</span>  <span style="float: right;">Date</span> </div> Name & Title (please print): Sam Smith – Administrative Assistant
RM Review: _____      Archives Review: _____  Other Review: Office: _____      Approval: _____	

7. List of Record Series						
A. Schedule Identifier (e.g. GS1-SL)	B. Item Number (e.g. #80)	C. Retention Schedule Title (e.g. Grant Files: Recipient)	D. Inclusive Dates	E. Volume	F. Retention (RM Use Only)	G. Disposition Action & Date Completed
GS1-SL	#435	Financial Transaction Records: Detail	7/1/2014-6/30/2017	7 c.f.		
GS1-SL	#52	Travel Records	7/1/2015-6/30/2017	1.5 c.f.		

<b>8. Disposal Authorization (RM USE ONLY)</b> Disposal for the records listed above is authorized. Any corrections or modifications are indicated on this document appropriately.  _____ Sara Kiszka, University Records Manager <span style="float: right;">Date</span>  (352) 273-2678 <a href="mailto:lib-recordmanagement@uflib.ufl.edu">lib-recordmanagement@uflib.ufl.edu</a> P.O. Box 117005 Smathers Library Gainesville, FL 32611-7005	<b>9. Certification of Disposal</b> The above listed records have been disposed of in the manner and on the date shown in Box 7, Column G.  _____ Signature <span style="float: right;">Date</span>  Name & Title (please print):  _____ Witness <span style="float: right;">Affiliation</span>
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