

**RECORDS TRANSFER LIST**  
**FULTON COUNTY BOARD OF EDUCATION**  
**RECORDS MANAGEMENT OFFICE**

**INSTRUCTIONS:** Complete Sections I and II. Number all boxes consecutively. On one end of the box in the upper right-hand corner, put the retention number; in the upper left-hand corner, put the box number; and in the middle, put the school/department name. Send or fax this request to the Records Management Department at The Instructional Technology Center and keep a copy for your files.

**SECTION I**

School/Department Transferring Records

Store Records  
 Destroy Records

Date Records Boxed

Number of Boxes Transferred

School/Department Head Signature

Print: \_\_\_\_\_

Sign: \_\_\_\_\_

*CONTACT PERSON/ROOM NO.*

**SECTION II** List Box #, Retention #, and Contents for each box transferred. **BE SURE TO INCLUDE DATES.** Please group like retention schedule numbers together. You can list up to 10 boxes on each Transfer List. Please fill in the Destruction Date.

BOX #	RETENTION #	CONTENTS	DATES INCLUDED	DESTRUCTION DATE