

**RECORDS DISPOSITION AUTHORIZATION  
STATE AGENCIES**

Form RC-108 (Revised 01/2010)



STATE OF CONNECTICUT  
Connecticut State Library  
Office of the Public Records Administrator  
231 Capitol Avenue, Hartford, CT 06106  
[www.cslib.org/publicrecords](http://www.cslib.org/publicrecords)

**INSTRUCTIONS:**

1. Use this form to obtain approval for disposition (destruction or transfer) of public records pursuant to CGS §11-8a.
2. All records must be on an approved *Records Retention Schedule*. If necessary, use additional forms. Each form must be signed. Please fill-out the form completely and legibly and submit it to the Office of the Public Records Administrator **at least 20 days prior** to the proposed disposition date.
3. **Volume of Records:** Letter-size drawer = 1.54 cubic ft. / Legal-size drawer = 2.0 cubic ft. / Record carton (standard banker's box) = 1.0 cubic ft

<b>STATE AGENCY:</b>		<b>DIVISION / UNIT:</b>		<b>ADDRESS:</b>		
<b>RMLO (type or print):</b>		<b>TITLE OF RMLO (type or print):</b>		<b>RMLO PHONE:</b>		<b>Page of</b>
I hereby certify that the records listed below have met the retention requirements established by the Office of the Public Records Administrator in the form of approved records retention schedules. <b>No records listed, in our opinion, pertain to any pending case, claim, or action.</b>				<b>APPROVED (Signature of RMLO):</b>		<b>DATE:</b>
SCHEDULE & SERIES # <small>(e.g., S4-020)</small>	RECORDS SERIES TITLE	DATES OF RECORDS		VOLUME OF RECORDS <small>(indicate cubic ft.)</small>	PROPOSED DATE OF DISPOSITION	DO NOT DESTROY <small>(staff use only)</small>
		FROM	THRU			
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
<b>APPROVED (State Archivist):</b>		<b>DATE:</b>		<b>APPROVED (Public Records Administrator):</b>		<b>DATE:</b>
<b>PUBLIC RECORDS NOTES:</b>						