

LANL Environmental Programs (EP) Directorate, Record Transmittal Form

To complete this form, see instructions on following pages. Use continuation version of form to list more records. See EP-DIR-SOP-4004 for more information.

Transmittal date: _____ Priority Processing? Yes No **Official Use Only?** Yes No **UCNI?** Yes No Page _____ of _____

Reference Cited in NMED Deliverables? Yes No **Receipt Acknowledgement:** Do you need this form returned to you? Yes No

Transmitter Information

Z # : _____ Name: _____ E-mail: _____ Transmitters Organization: _____

Contamination Potential

To the best of my knowledge, the record(s) has no *radioactive* contamination. Signature: _____

Record Type: Individual Record (no package) New package E-mail Add to existing package (fill in # and title below) Resubmitted/superseded record (record # _____)

Package(s) # : _____ Package title(s): _____

Reference/Retrieval Information

Organization: _____

Record (Package) Contents

Record Title	Media Type	Document Date	Author/Originator	Other Doc. # (e.g. Doc. Catalog #)	Page Count	ERID (RPF only)

RPF Use Only: (names and dates)

Accepted _____

Entered _____

Scanned _____

QC: _____