## **RECORDS STORAGE AND DISPOSITION (RSD)**

Name of Person Storing Records (Print)		Div/Sec/Dept. Name		Mail Station		Phone Extension		FAX Number		Date	
(1) Records Management No.	(2) Dept Box No.	(3) Record Description		(4) DOE/GRS Retention Schedule No., Item, Paragraph		(5) Retention (6) Period		(6) Dispo	sal Date	(7) Vital Records If yes, "X"	(8) Epidemiological Record, Mark "X"