



NATIONAL  
DECLASSIFICATION  
CENTER

**Classified Records Transfer Request Form**

The National Declassification Center (NDC) requests agencies provide documentation certifying eligibility for transfer of records to the National Archives as required by 32 CFR 201.30j and 201.34. The completed form must accompany each ERA Transfer Request (TR) as part of the request for records to be transferred to the National Archives (SF 258) if special circumstances merit use.

These criteria are outlined on NA Form 36352, Classified Records Transfer Checklist. This form, or a copy containing the same information, must be completed in its entirety for each classified record to be transferred to the National Archives. The completed form must accompany each ERA Transfer Request (TR) as part of the request for records to be transferred to the National Archives (SF 258) if special circumstances merit use.

Questions concerning the attached form should be directed to Don McIlwain, FOIA and Mandatory Review Chief, NDC at (301) 837-0587 or David Mengel, NDC Deputy Director, at (301) 837-1975.

**Agency:**

**Agency ID #:**

**Agency Declassification Manager:**

**FRC Transfer Number:**

**Phone Number:**

**Series/Collection Title:**

**Box Numbers:**

**Disposition Authority:**

1. Have these records been reviewed for declassification in accordance with [section 3.3 of E.O. 13526](#) and [32 CFR section 2001.30j](#)?

Yes

No (If no, please provide your agency's plan for compliance)

2. Do these records have Kyl-Lott certification (see [Special Historical Records Review Plan \(Supplement\)](#))?

Yes (documentation attached)

No (If no, please provide your agency's plan for compliance)

3. Have any documents been tabbed for exemption from declassification using an SF 715 (or equivalent for special media or electronic records)?

Yes No

Note that unless properly exempted, your agency's equity is automatically declassified when 25 years old.

4. Have all referrals and exclusions been tabbed in accordance with [32 CFR section 2001.34](#)?

Yes

No (If no, please provide your agency's plan for compliance)

Referrals

5. Additional:

6. Comments/Notes: