

**OKLAHOMA DEPARTMENT OF LIBRARIES
OFFICE OF ARCHIVES AND RECORDS
RECORDS MANAGEMENT DIVISION**

RECORDS TRANSFER AUTHORIZATION

AGENCY REQUESTING TRANSFER

DATE PREPARED

DIVISION or SECTION

AGENCY ADDRESS

NAME OF AGENCY CONTACT

PHONE NUMBER OF AGENCY CONTACT

SIGNATURE and TITLE of AUTHORIZING

HARD COPY RECORDS MICROFILM MICROFICHE COMPUTER TAPES OTHER

RECORDS DISPOSITION SCHEDULE NUMBER

or

RECORDS DISPOSITION AUTHORIZATION NUMBER

SERIES NUMBER	SERIES TITLE	INCLUSIVE DATES	VOLUME or REEL #	AUTHORIZED DISPOSITION

(FOR OKLAHOMA DEPARTMENT OF LIBRARIES USE)

ACCESSION NUMBER

DATE RECORDS WERE ACCESSIONED

LOCATION:

Row _____ Tier _____
Vault 1 _____ Vault 2 _____

SIGNATURE of DEPARTMENT of LIBRARIES REPRESENTATIVE