

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Indian Health Service

CERTIFICATE OF RECORDS DESTRUCTION

This form documents the destruction of federal records in accordance with the Federal Records Act of 1950, as amended (44 U.S.C., Chapters 29, 31, and 33).

1. AGENCY/LOCALITY	2. DIVISION/DEPARTMENT/SECTION	
3. PERSON COMPLETING FORM	4. LOCATION	5. PHONE

6. RECORDS TO BE DESTROYED							
a) Retention and Schedule Item #	b) Records Series Title	c) Date Range		d) Location	e) Volume	f) Destruction Method	g) Disposal Date
		Start (mm/yy)	End (mm/yy)				

7. APPROVING OFFICIAL <i>(Print)</i>	SIGNATURE	DATE <i>(mm/dd/yyyy)</i>
8. RECORDS OFFICIAL <i>(Print) (HQ RMO or Area RLO)</i>	SIGNATURE	DATE <i>(mm/dd/yyyy)</i>
9. RECORDS DESTROYED BY <i>(Print)</i>	SIGNATURE	DATE <i>(mm/dd/yyyy)</i>

(continued on next page)

CERTIFICATE OF RECORDS DESTRUCTION*Instructions for Completing Form*

- Line 1 Agency/Location:** Examples IHS/Albuquerque; IHS/Headquarters
- Line 2 Division/Department/Section:** Enter the name of your division, department and/or section.
- Line 3 Person Completing Form:** Enter name and job title of the person completing the form.
- Line 4 Address:** Enter the office address.
- Line 5 Phone:** Enter the telephone number for person completing the form.
- Line 6 Records to be destroyed:** List the records you wish to destroy:
- Use the information from the General Records Schedules or the IHS Records Disposition Schedule enter the **general schedule number and records series item number** that apply to the records to be destroyed. ENTER ONLY ONE SERIES NUMBER PER LINE. Disposition schedules are available at: <http://www.archives.gov/records-mgmt/grs/> and http://www.ihs.gov/DRA/index.cfm?module=dsp_dra_recmgmt_intro
Example: GRS 16-7; (GRS 16 is the schedule number); (7 is the item number)
Example: IHSRDS 1-6-1a; (1 is the schedule number); (6-1a is the item number)
 - Enter the **Records Series Title** from one of the two schedules to provide more detail on records being destroyed.
 - Enter the **date range of the records** to be destroyed. Use month/year to month/year (e.g., 10/00 to 9/07). The date range must match the retention period listed in the schedule.
 - Enter the **location** where the records are currently stored (include room, building or server designation).
 - Enter the **total volume** of records to be destroyed in **cubic feet (cu. ft.) or number of boxes**.
If destroying electronic records, enter the approximate size of the files in megabytes, by type of media containing the data or by number of files.
 - Enter the **method of destruction**: *i.e.* recycling, regular trash, shredding, wiping (electronic data); only one method per line.
 - Enter the date that the records were disposed.
- Line 7 Approving Official:** The individual or head of a functional program area shall print their name, sign and date this line.
- Line 8 Designated Records Officer:** DO NOT COMPLETE. The HQ or Area Records Liaison Officer will sign this when approved.
- Line 9 Records Destroyed by:** Complete ONLY after form is returned to office once approved by the HQ or Area Records Liaison Officer. Must be signed upon destruction by the person who can certify that records were properly and legally destroyed and the date of their final destruction.

SEND THE SIGNED ORIGINALS TO:**Headquarters**

IHS Records Management Officer
5600 Fishers Lane, Mailstop 09E70
Rockville, MD 20857

California Area

Area Records Liaison Officer
650 Capital Mall, Suite 7-100
Sacramento, CA 96814

Phoenix Area

Area Records Liaison Officer
40 North Central Avenue
Phoenix, AZ 85004

Alaska Area

Area Records Liaison Officer
4141 Ambassador Drive
Anchorage, AK 99508-5928

Great Plains Area

Area Records Liaison Officer
115 Fourth Avenue SE
Aberdeen, SD 57401

Portland Area

Area Records Liaison Officer
1414 NW Northrup Street, Suite 800
Portland, OR 97209-2790

Albuquerque Area

Area Records Liaison Officer
4101 Indian School Road NE Suite 225
Albuquerque, NM 87110

Nashville Area

Area Records Liaison Officer
711 Stewarts Ferry Pike
Nashville, TN 37214-2634

Bemidji Area

Area Records Liaison Officer
2225 Cooperative Court NW
Bemidji MN 56601

Navajo Area

Area Records Liaison Officer
P.O. Box 9020
Window Rock, AZ 86515-9020

Billings Area

Area Records Liaison Officer
2900 4th Avenue North
Billings, MT 59101

Oklahoma City Area

Area Records Liaison Officer
701 Market Drive
Oklahoma City, OK 73114-8132