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| AGENCY | ACCESSION NO.  | DATE REC’D |
| DIVISION/UNIT  | RM CODE |
| MAILING ADDRESS |  RANGE SECTION(S) NO. OF CU. FT.

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 |  TOTAL CU. FT.

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 |
| PHONE NO.:EMAIL: | RECORDS CENTER MANAGER |
| AGENCY OFFICIAL  |  **TO BE COMPLETED AT STATE RECORDS MANAGEMENT CENTER** |

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| BOX | DESCRIPTION OF RECORDS | SCHEDULE NO., ITEM NO. AND DISPOSAL DATE |

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