Unified Judicial System Disposal Log – Non-Permanent Records

1. _____ *County*
2. _____ *Judicial District*
3. _____ *Record Custodian*
4. _____ *Office/Department*
5. _____ *Address*
6. _____ *Telephone No.*

7. RECORD TITLE	8. AUTHORIZATION FOR DISPOSAL SCHEDULE [§ Name (e.g. 5.7 Juvenile)]	9. INCLUSIVE DATES OF RECORDS	10. FORMAT	11. MICRO-FILMED (Y-N)	12. ORIGINAL (Y-N)

FOR USE BY RECORD CUSTODIAN

I, _____, hereby request that the Record Retention Officer authorize the disposal of the listed records.
Record Custodian's Name

_____ *Record Custodian's Signature*
_____ *Title*
_____ *Date*

FOR USE BY RECORD RETENTION OFFICER

I, _____, hereby approve of the disposal of the records listed as requested.
Record Retention Officer's Name

_____ *Record Retention Officer's Signature*
_____ *Title*
_____ *Date*

Original to be retained by the District Record Retention Officer. Copy to be provided to the Record Custodian. Copy to be provided to the AOPC on or before January 15th each year.