## **New Hampshire Division of Archives & Records Management**

## **RECORDS RETENTION AUTHORIZATION**

Department:					Divi	sion:			_
Item No.	Suffix No.			on		d Retentic Rec. Ctr			Comments
Prena	red Rv		1			,			/
Тере	irea By	Signature	/	Type or print name			ate Sign	ned	Telephone
Approved By				_/			·		/
		Signature		Type or print name	2	,	Title		Date Signed
Appr	oved by	State Records Manag							
			Signature						Date
Appr	oval to	begin transfer to Reco	rds						
Director/State Archivist								Date	