MEMORANDUM OF TRANSFER OF RECORDS TO THE NEW YORK STATE ARCHIVES OFFICE OF CULTURAL EDUCATION STATE EDUCATION DEPARTMENT

| Date Received | Accession Number |
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Revised10/01

| | STATE EDUCATION DELIMINATION | Leave Blank Themves Osc Only | |
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| 1. | AGENCY REQUESTING TRANSFER: Agency | 2. RECORDS DISPOSITION AUTHORIZATION NUMBER: | |
| | Major Subdivision | 3. CURRENT LOCATION OF RECORDS: ☐ State Records Center | |
| | Minor Subdivision | ☐ Agency Space (specify): | |
| | Office/Unit | _ | |
| | Person with whom to confer about contents, location, and shipping of records: | | |
| | Name | Phone Number | |
| 5. | ESTIMATED VOLUME: cubic feet | items (specify) | |
| | ESTIMITED VOLUME custo feet | rems (specify) | |
| 6. | STATEMENT OF AGENCY REPRESENTATIVE: The records described above and on the attached pages are hereby transferred to the official custody of the New York State Archives in accordance with Section 57.05 of the Arts and Cultural Affairs Law. It is agreed that these records will be administered in accordance with the provisions of Section 57.05 of the Arts and Cultural Affairs Law and the rules and regulations of the Commissioner of Education. The State Archives may dispose of any containers, unused forms, blank stationery, duplicate records, or other nonrecord material in any manner authorized by law or regulation without further consent of this agency. I certify that I am authorized to act for this agency on matters pertaining to the disposition of agency records. | | |
| | SIGNATURE TITL | EDATE | |
| 7. | REMARKS CONCERNING SHIPPING/DISPOSIT | ION: | |
| 8. | RECORDS RECEIVED AT STATE ARCHIVES: | | |
| | SIGNATURE TITL | .EDATE | |