

## Madrid-Waddington Central School Records Disposition Authorization

In accordance with current New York State retention/disposition schedules, the records listed below can be scheduled for destruction.

Department/Unit: \_\_\_\_\_

| Record Title | Date Span | ED-1 Schedule Item # | Sequence | Storage Location |
|--------------|-----------|----------------------|----------|------------------|
|              |           |                      |          |                  |

\_\_\_\_\_  
Clerk Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Tag # \_\_\_\_\_

I authorize the destruction of the above described record in accordance with adopted Record Retention and Disposition Schedule ED-1.

\_\_\_\_\_  
Department Designee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Records Management Officer

\_\_\_\_\_  
Date

DESTRUCTION

\_\_\_\_\_  
Method

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signed