



REQUEST FOR PERMISSION TO DESTROY OR TRANSFER CERTAIN PUBLIC RECORDS (PR-1)

State Form 30505 (R6 / 6-15)

INDIANA ARCHIVES AND RECORDS ADMINISTRATION
402 West Washington Street, Room W472
Indianapolis, Indiana 46204
Telephone: 317-232-3380
cty@lara.in.gov

- INSTRUCTIONS:**
1. Prepare in quintuplicate (five (5) copies).
 2. The original and three (3) copies must be filed with the County Commission of Public Records and a copy retained by the originating agency.
 3. Upon approval by the County Commission, the Secretary must forward one (1) copy to the Indiana Archives and Records Administration at the above address; one (1) copy to the county historical society (if any); and retain the original and one (1) copy for sixty (60) days, during which time the records may be procured by an active genealogical or historical society of the county or by the Indiana Archives and Records Administration, State Archives Division.
 4. Upon the expiration of sixty (60) days the copy retained shall be forwarded to the agency, as authority to dispose of the records in accordance with the action thereon by the County Commission.
 5. The original shall be preserved as a part of the minutes of the County Commission.

RECORDS MEASUREMENT TABLE	
1 Archives box (10" x 12" x 15") inside = 1 cubic foot of records	1 Linear foot of 8 1/2" x 14" documents = 1 cubic foot
1 Letter size file drawer = 1 1/2 cubic feet of records	1 Linear foot of 8 1/2" x 11" documents = 4/5 cubic feet
1 Legal size file drawer = 1 1/2 cubic feet of records	1 Linear foot of tab cards = 1/6 cubic feet
1 Number 11 record transfer box = 2 cubic feet of records	1 Linear foot of 3" x 5" cards = 1/9 cubic feet

TO BE COMPLETED BY THE ORIGINATING AGENCY OR OFFICE.

Name of government agency: CITY OF WARSAW Parks & Recreation Department Date (month, day, year): 05/30/2016

Address of government agency (number and street, city, state, and ZIP code): 117 E. Canal St. Warsaw, IN 46580

Name of contact person: Heather Frazier Telephone number: 514 1312955A E-mail address: hfrazier@warshaw.in.gov

Type of request (check one): Request to destroy Request to microfilm and destroy Request to destroy previously microfilmed originals
 Request to transfer to: _____

TO: Secretary, Commission of Public Records, of KOSCIUSKO County, Indiana

NAME OR DESCRIPTION OF RECORDS	VOLUME OF RECORDS (See records measurement table.)	DATE OF RECORDS (month, day, year)
<u>CLERK OFFICE RECEIPTS</u>	<u>1 cubic ft.</u>	<u>2013-2014</u>
<u>GRANT APPLICATIONS</u>	<u>1 cubic ft.</u>	<u>1995-2009</u>
<u>AP COPIES</u>	<u>1 cubic ft.</u>	<u>2014 (1/1/14-12/14)</u>
<u>CAMPGROUND RECEIPTS</u>	<u>1 cubic ft.</u>	<u>2000-2012</u>

FILED
JUN 19 2018
Ann Jorpy
CLERK KOSCIUSKO CIRCUIT COURT

All of the above records have met their retention requirements in an applicable schedule as of January 1, of the present year. All records requiring audit have been audited by the State Board of Accounts for the period indicated; the report of the audit is on file and does not show any exceptions taken or unsettled charges.

Approved by: <u>Thyme A. Christensen</u>	Title: <u>Clerk-Treasurer</u>	Date (month, day, year): <u>5/30/18</u>
Requested by: <u>Thyme A. Christensen</u>	Title: <u>Clerk Treasurer</u>	Date (month, day, year): <u>5/30/18</u>

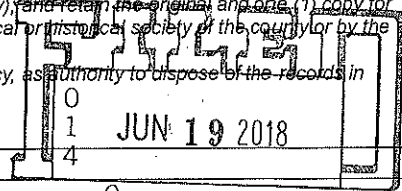


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State Form 30505 (R6 / 6-15)

INDIANA ARCHIVES AND RECORDS ADMINISTRATION
 402 West Washington Street, Room W472
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 cty@iara.in.gov

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1 Legal size file drawer = 1 1/2 cubic feet of records	1 Linear foot of tab cards = 1/8 cubic feet
1 Number 11 record transfer box = 2 cubic feet of records	1 Linear foot of 3" x 5" cards = 1/9 cubic feet

TO BE COMPLETED BY THE ORIGINATING AGENCY OR OFFICE.

Name of government agency: City of Warsaw Date (month, day, year): 6/10/18

Address of government agency (number and street, city, state, and ZIP code): 102 S. Buffalo St, Warsaw, IN 46580

Name of contact person: Connie Dawson Telephone number: (574) 385-2073 E-mail address: cdawson@warsaw.in.gov

Type of request (check one) Request to destroy Request to microfilm and destroy Request to destroy previously microfilmed originals
 Request to transfer to: _____

TO: Secretary, Commission of Public Records, of KOSCIUSKO County, Indiana

NAME OR DESCRIPTION OF RECORDS	VOLUME OF RECORDS (See records measurement table.)	DATE OF RECORDS (month, day, year)
Completed grants	1 1/2 cu. ft.	1997-2002
City Insurance	1 1/2 cu. ft.	2003-2006
Budget Books	1 1/2 cu. ft.	2004-2006
2007 check copies	3 cu. ft.	2007
Claim vouchers	15 cu. ft.	2007
Receipts	1 1/2 cu. ft.	2011
Budget edits, Vendor Listing, Voucher Listing, P.O. file listing	1 1/2 cu. ft.	2011
Misc. Payroll stuff	1 1/2 cu. ft.	2010
Report of collections	1 1/2 cu. ft.	2011
Various City Bids	1 1/2 cu. ft.	2000-2006

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Approved by: Dynne A. Christensen Title: Clerk-Treasurer Date (month, day, year): 6/10/18

Requested by: Dynne A. Christensen Title: Clerk-Treasurer Date (month, day, year): 6/10/18

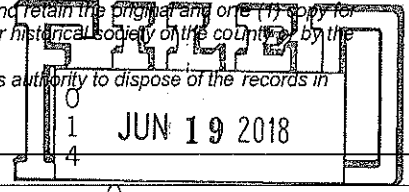


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1 Number 11 record transfer box = 2 cubic feet of records	1 Linear foot of 3" x 5" cards = 1/9 cubic feet

CLERK KOSCIUSKO CIRCUIT COURT

TO BE COMPLETED BY THE ORIGINATING AGENCY OR OFFICE.

Name of government agency: City of Warsaw Date (month, day, year): 6/01/18

Address of government agency (number and street, city, state, and ZIP code): 102 S. Buffalo St., Warsaw, IN 46580

Name of contact person: Connie Dawson Telephone number: (574) 385-2073 E-mail address: cdawson@warsaw.in.gov

Type of request (check one): Request to destroy Request to microfilm and destroy Request to destroy previously microfilmed originals
 Request to transfer to: _____

TO: Secretary, Commission of Public Records, of KOSCIUSKO County, Indiana

NAME OR DESCRIPTION OF RECORDS	VOLUME OF RECORDS (See records measurement table.)	DATE OF RECORDS (month, day, year)
<u>General Files, Various Correspondence</u>	<u>1 cu ft.</u>	<u>2009-2015</u>
<u>Bank statements</u>	<u>1 cu ft.</u>	<u>2005-2013</u>

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Approved by: <u>Bynne A. Christiansen</u>	Title: <u>Clerk-Treasurer</u>	Date (month, day, year): <u>6/01/18</u>
Requested by: <u>Bynne A. Christiansen</u>	Title: <u>Clerk-Treasurer</u>	Date (month, day, year): <u>6/01/18</u>



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INDIANA ARCHIVES AND RECORDS ADMINISTRATION

402 West Washington Street, Room W472

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JUL 31 2019

RECORDS MEASUREMENT TABLE

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1 Number 11 record transfer box = 2 cubic feet of records	1 Linear foot of 3" x 5" cards = 1/9 cubic feet

TO BE COMPLETED BY THE ORIGINATING AGENCY OR OFFICE.

Name of government agency: CITY OF WARSAW PARKS DEPARTMENT Date (month, day, year): 7/9/19

Address of government agency (number and street, city, state, and ZIP code): 117 E. CANAL ST. WARSAW, IN 46500

Name of contact person: HEATHER FRAZICK Telephone number: (317) 372-9554 E-mail address: HFRAZICK@WARSAW.IN.GOV

Type of request (check one): Request to destroy Request to microfilm and destroy Request to destroy previously microfilmed originals
 Request to transfer to: _____

TO: Secretary, Commission of Public Records, of WARSAW County, Indiana

NAME OR DESCRIPTION OF RECORDS	VOLUME OF RECORDS (See records measurement table.)	DATE OF RECORDS (month, day, year)
Rental Leases	1 cubic foot of records	1/2006-12/2008
General Receipts	" "	11/07-5/11/12
Accounts Payable Voucher Copies	" "	1/15-12/15
Timecards	" "	1/13-7/16
Rental Leases	" "	1/09-12/10
Rental Leases	" "	1/11-12/13
Canoe waivers	.5 cubic foot	2013
POCs/General Receipts	" 1 cubic foot "	1/15-12/15
Accounts payable voucher copies	" "	1/15-12/15
Registration Forms	" "	2014-2015
Rental Leases	" "	2014-2015

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Approved by: Brynn A. Christensen Title: Clerk-Treasurer Date (month, day, year): 7/10/19

Requested by: Brynn A. Christensen Title: Clerk-Treasurer Date (month, day, year): 7/10/19



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0 JUL 31 2019
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Name of government agency: City of Warsaw Date (month, day, year): 7/09/19

Address of government agency (number and street, city, state, and ZIP code): 102 S. Buffalo St. Warsaw, IN 46580

Name of contact person: Connie Dawson Telephone number: (574) 385-2073 E-mail address: cdawson@warshaw.in.gov

Type of request (check one): Request to destroy Request to microfilm and destroy Request to destroy previously microfilmed originals
 Request to transfer to: _____

TO: Secretary, Commission of Public Records, of KOSCIUSKO County, Indiana

NAME OR DESCRIPTION OF RECORDS	VOLUME OF RECORDS (See records measurement table.)	DATE OF RECORDS (month, day, year)
Claim Vouchers	9 cu ft.	2008
Misc Payroll stuff	1 1/2 cu ft.	2011
Receipt & Budget Edits	1 1/2 cu ft.	2012
Bank statements & reconciliations	1 1/2 cu ft.	2012
Voucher listing	1 1/2 cu ft.	2013
Deposit tickets	1 1/2 cu ft.	2007-2015

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Approved by: Janne A. Christensen Title: Clerk-Treasurer Date (month, day, year): 7/09/19

Requested by: Janne A. Christensen Title: Clerk-Treasurer Date (month, day, year): 7/09/19



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2
JUL 31 2019
CLERK, KOSCIUSKO CIRCUIT & SUPERIOR COURTS

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TO BE COMPLETED BY THE ORIGINATING AGENCY OR OFFICE.

Name of government agency: City of Warsaw Building & Planning Dept. Date (month, day, year): 7-10-2019

Address of government agency (number and street, city, state, and ZIP code): 102 S Buffalo St. Warsaw IN 46580

Name of contact person: Kim Arnold Telephone number: (574) 372-9550 E-mail address: karnold@warsaw.in.gov

Type of request (check one): Request to destroy Request to microfilm and destroy Request to destroy previously microfilmed originals
 Request to transfer to: _____

TO: Secretary, Commission of Public Records, of Kosciusko County, Indiana

NAME OR DESCRIPTION OF RECORDS	VOLUME OF RECORDS (See records measurement table.)	DATE OF RECORDS (month, day, year)
<u>Time Cards</u>	<u>1 cu foot</u>	<u>2012, 2013, 2014 2015 entire year</u>

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Approved by: Thyme A. Christiansen Title: Clerk-Treasurer Date (month, day, year): 7/11/19

Requested by: Thyme A. Christiansen Title: Clerk-Treasurer Date (month, day, year): 7/11/19