

CHARLES COUNTY GOVERNMENT
RECORDS MANAGEMENT DIVISION
RECORDS RETENTION AND DISPOSAL SCHEDULE

Schedule No. C 826

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Agency
Treasurer's Office

Division/Unit

Item No.	Description	Retention
01	GENERAL CORRESPONDENCE Subject arrangement of original incoming letters, copies of outgoing letters, memoranda, studies, reports, directives, policies and other materials related to the administration of the agency.	Screen annually and destroy that material having no further administrative, fiscal, legal or operational value. Retain permanently any material that serves to document the origin, development, and accomplishment of the agency. Transfer periodically to the Maryland State Archives.
02	UNOFFICIAL PERSONNEL FILES Files contain information on current employees. Files may contain but are not limited to copies of applications, annual reviews, reprimands, and disciplinary actions, awards, doctor slips, accident reports, resumes, etc.	Retain for three (3) years after termination, then destroy.
03	LEAVE AND TIME SHEETS This file contains office copies of employees' daily, weekly, monthly, and annual leave records including leave and comptime requests, timesheets, etc.	Retain for three (3) years, then destroy.
04	BUDGET RECORDS Annual Budget submissions. Monthly budget printouts and workpapers.	Retain for three (3) years, then destroy.
05	BANK DEPOSIT LOG AND DEPOSIT SLIPS Binder that may contain date, cashier name and code, amount of deposit, and disbursement log for investments. Deposit slips are bank validated.	Retain for three (3) years and until all audit requirements have been fulfilled, then destroy.

Schedule Approved by Department,
Agency, or Division Representative
Date 6/15/98
Signature Eugene T. Lauer
Typed Name Eugene T. Lauer
Title County Administrator

Schedule Authorized by State Archivist

Date JUN 22 1998

Signature

Edward C. Papenfuss

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Item No.	Description	Retention
06	ELECTRONIC STOP PAYMENTS Copy of computer generated stop payment of check which may contain the check number, date issued, payee, amount of check, stop pay acknowledgment, reason for stop payment, and date of stop payment.	Retain for one (1) year after fiscal year, then destroy.

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Item No.	Description	Retention
07	COPIES OF HANDCUT CHECKS May also contain backup documents (i.e., copies of check requests, copies of stop payments and memo to re-issue check, etc.)	Retain for two (2) years after fiscal year, then destroy.
08	WIRE TRANSFERS AND ACH TRANSFERS May contain copies of memos instructing monies to be transferred either by wire or ACH. ACH transfers may also contain copies of computer generated reports indicating amount of transfer, transferee, receiving bank account information, effective date of transfer, and sending bank account information.	Retain for two (2) years after fiscal year, then destroy.
09	INVESTMENT INFORMATION May contain copies of investment purchase sheets, individual investor's files, and security trust monthly reports.	Retain for two (2) years after fiscal year, then destroy.
10	COLLATERAL REPORTS AND PLEDGES May contain information regarding securities pledged, Statements of Pledged Activity, and authorizations to deposit and withdraw securities for collateral.	Retain for three (3) years after fiscal year, then destroy.
11	BANK STATEMENTS May contain copies of General Fund reconciliation, Bank analysis statements indicating monthly fees charged, and Portfolio valuation statements including accumulated transactions.	Retain for two (2) years after fiscal year, then destroy.
12	CHECK LOG Ledger book which may contain dates of check runs, starting and stopping check numbers, and date and check numbers for all voided and handcut checks.	Retain for one (1) year after fiscal year, then destroy.
13	RETURNED CHECK LOG May contain actual returned checks for property taxes or Motor Vehicle tags, copies of letter sent to payer, date check was returned, name of payer, amount of check, date notice was sent to payer, date restitution was made, initials of employee sending letter to payer.	Retain for three (3) years and until all audit requirements have been fulfilled, then destroy.

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Item No.	Description	Retention
14	NIGHT DEPOSITORY LOG Contains information regarding items deposited into Night Depository including name, account number, payment type and amount of payment.	Retain for one (1) year after fiscal year, then destroy.
15	ACCOUNTS PAY. & SECTION 8 CHECK REGISTER May contain summary listing of checks paid each week (includes check number, date, vendor number, name and check amount.	Retain for one (1) year after fiscal year, then destroy.
16	MVA ACTIVITY REPORTS May contain summaries of tags sold, owners' names, title number, tag number, fees collected, vehicle class, registrations voided, etc. from daily MVA activity.	Retain for two (2) years after fiscal year, then destroy
17	DAILY MVA TAG RENEWAL LEDGER Ledger includes number of tags sold, state and county fees collected, and daily totals for each cashier.	Retain for one (1) year after fiscal year, then destroy.
18	UTILITY BILLS & ACCOUNTS RECEIVABLE PAID Contains paid Utility and Accounts Receivable billing receipts and may include customer name, address, account number, invoice number, amount billed, amount and date paid, and cashier validation.	Retain for three (3) years after fiscal year and until all audit requirements have been fulfilled, then destroy.
19	CASHIER PRINTER TAPES Printer tape of cashiers' transactions including cashier code, date, type of transaction, receipt number, document and check validation.	Retain for six (6) months, then destroy.
20	A/P & SECTION 8 CHECK SIGN-OUT CARDS Log of checks released to individuals which may contain date of check run, name on check, amount of check, signature of recipient, initials of person releasing check.	Retain for three (3) years and until all audit requirements have been fulfilled, then destroy.

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Item No.	Description	Retention
21	PROPERTY TAX ROLLS State Dept of Assess. & Taxation Control totals, computer printouts of property owners, account number and assessment information used for original billing for any particular tax type and tax year. Also includes Homeowner Tax Credit tax rolls.	Retain for three (3) years after fiscal year, then destroy.
22	TAX BILLING RECORDS Tax billing records may contain amount of taxes billed for the year, type of taxes billed (county, state, special, charges, etc) and date and amount of payments. Billing record information is transferred to microfiche periodically.	Retain for fifty (50) years after fiscal year and until all audit requirements have been fulfilled, then destroy.
23	PERSONAL PROPERTY AND PUBLIC UTILITY TAX WRITE OFFS Copy of each taxpayers tax inquiry screen, query reports on amount of taxes owed, accounts receivable reports on all unpaid balances prior to write-off, and copy of write-off report sent to State of MD Comptroller's Office.	Retain for twenty-five (25) years after fiscal year and until all audit requirements have been fulfilled, then destroy.
24	TAX PROPERTY MAINTENANCE FILES Contains information regarding changes to properties such as address changes, property transfers (changes in ownership), set-up sheets to create new accounts, additions/abatements to assessment notices, certifications for personal property billings including public utilities, corporations and business personal property, and Homestead Credit adjustments.	Address changes-retain for two (2) years after fiscal year, then destroy. All other, retain for five (5) year then destroy.
25	LIEN INFORMATION Information concerning liens filed on corporations, businesses, public utilities including copies of notices, liens filed, returned mail and correspondence. Also includes Lien Releases containing release of lien forms, check requests to release liens, copy from Courthouse that lien was released including cashier's receipt.	Retain for three (3) years after liens are released and audit requirements have been fulfilled then destroy.

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Item No.	Description	Retention
26	MASS PAYMENT/BILLING INFORMATION Files may contain queries, memos, correspondence, Lotus spreadsheets, layout instructions, list of accounts, manual billings, computer printouts, listing of accounts paid through Mass Payment program billing tape.	Retain for three (3) years after fiscal year, then destroy.
27	SPECIAL ASSESSMENT INFORMATION Files may contain any information relating to special assessments including notice of liens, assessment information, copy of ordinance, owners of record, plats, agreements, release of liens, receipts from certified correspondence, printout of lotus spreadsheets, copy of transfer, tax bills, accumulative transaction listing, amortization, assessment rolls, journal entries and edit listings, check requests for refunds, transmittal forms, copies of checks, general correspondence	Retain for five (5) years after fiscal year assessment is paid in full and until all audit requirements have been fulfilled, then destroy.
28	AUDITORS' BALANCING REPORTS Assessable base-assessments billed and adjusted. Accounts Receivable-taxes billed and adjusted. Tax Refunds-held and released refund edit lists, refund check register, updated refunds report. Real Estate Bought at Tax Sale-all tax sale property purchased by County Commissioners. Unpaid Tax Listing-all outstanding taxes as of June 30	Retain for two (2) years after fiscal year and until all audit requirements have been fulfilled, then destroy.
29	RETURNED MAIL Tax bills and notices returned as undeliverable.	Retain for three (3) years, then destroy.
30	TAX SALE FILES Purchaser's Tax Sale Files-check requests, paid tax receipts, correspondence, court petitions, letters of satisfaction. Tax Sale Auction-unpaid tax listing, newspaper ad, incorporated town list, bid list, faxed deletions. Tax Sale Redemptions, Tax Sale Foreclosures, Tax Sale Books.	Auction & Redemptions-retain for five (5) years and until all audit requirements have been fulfilled, then destroy. Tax Sale Books and Foreclosures-retain for 25 years and until all audit requirements have been fulfilled, then destroy.

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Item No.	Description	Retention
31	HOMEOWNER TAX CREDIT FILES AND RECAPTURES Homeowner tax credit certificates, listing of homeowners with certificates paying semiannually, recaptured homeowners tax credit information and tax credit recapture release forms, check requests to State for recaptured tax credits.	Retain for two (2) years after fiscal year, then destroy.
32	STATE TAX RECEIVABLE MONTHLY REPORTS Copies of reports which include homeowner's tax credits, agricultural transfers, copies of E-17 request for state tax refund, copies of additions/deductions to assessable base, check request for State taxes, copy of check, state G/L transaction reports, tax receivable summary, Report of Collectors of State Tax.	Retain for five (5) years after fiscal year or until all audit requirements have been fulfilled, then destroy.
33	INCORPORATED TOWNS TAX RECEIVABLE MONTHLY REPORTS Monthly report of collections including check request for town taxes, copy of check, municipal payment/adjustment report, G/L transaction report, Report of Collections.	Retain for five (5) years after fiscal year or until all audit requirements have been fulfilled, then destroy. audit requirements have been fulfilled, then destroy.
34	HELD TAX REFUNDS AND PAID PROPERTY TAX REFUNDS Held Tax Refunds-pending property tax refunds including correspondence and backup documentation. Paid property tax refunds on corporation taxes, personal property taxes, real property taxes and public utility taxes. The file may contain the name of payee, address, amount of refund, check number, reason for the refund, and any correspondence or back up documentation for the refunds.	Retain for five (5) years after fiscal year of refund and until all audit requirements have been fulfilled, then destroy.
35	PAYMENT ALLOCATION UPDATES Cashier updates and queries of tax payments, payment edit listing, payment update and allocation, recalcs and adjustments on tax accounts, interest updates, accounts flagged for returned checks and utilities.	Retain for five (5) years after fiscal year and until all audit requirements have been fulfilled, then destroy.

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Item No.	Description	Retention
36	BALANCE OVER TAX SALE Correspondence, check requests, assessment notices, settlement sheet, deeds decree, lotus spreadsheets, copies of driver's licenses, affidavits, memos, death certificates, chart of heirs, last will and testaments, petition for letters' testamentary, estate inventory, appraisals of real estate, list of interested persons (Register of Wills), tax bills, certified receipts, balance over tax sale receipt, newspaper printout and Courthouse listing, certificate of sale, old correspondence, receipts from certified letters.	Retain for five (5) years after fiscal year of disbursement, then destroy.
37	BANKRUPTCY DEAD FILES Closed bankruptcy cases-forms, bankruptcy notices, correspondence containing bankruptcy proceedings and dismissals/discharges of debtors.	Retain for two (2) years after fiscal year in which case was discharged/dismissed, then destroy.
38	FRONT FOOT SPECIAL ASSESSMENT CHANGES Forms authorizing increases or decreases to special assessments for current or prior years on the tax rolls.	Retain for five (5) years after fiscal year, then destroy.
39	PAID TAX RECEIPTS Record of taxes paid with validation by cashiers.	Retain for three (3) years and until all audit requirements have been fulfilled, then destroy.

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p> <p>PAGE ____ OF ____</p>	
<p>1. Department/Agency Charles County Government</p>		<p>2. Division Treasurer's Office</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title Correspondence <i>Files and Correspondence Log</i></p>				<p>5. Earliest Year/Latest Year <i>9/24/94 to Present</i></p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)</p> <p>Correspondence reference number, customer's name, correspondence subject, date, and initials of person sending correspondence out.</p> <p><i>Copies of general correspondence.</i></p>					
<p>7. Record Series Format(s)</p> <p><input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input checked="" type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p style="text-align: center;">1</p> <p>Number</p> <p><input type="checkbox"/> File Drawer(s)</p> <p><input type="checkbox"/> Microfilm Reel(s)</p> <p><input type="checkbox"/> Computer Tape(s)</p> <p><input type="checkbox"/> Other (specify)</p> <p>Looseleaf Binder</p> <p>10. Annual Accumulation</p> <p>Less than _____</p> <p>1 Binder</p> <p>Number</p> <p><input type="checkbox"/> File Drawer(s)</p> <p><input type="checkbox"/> Microfilm Reel(s)</p> <p><input type="checkbox"/> Computer Tape(s)</p> <p><input type="checkbox"/> Other (specify)</p>	
<p>11. File is Used</p> <p><input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly</p>			<p>12. File Becomes Inactive After</p> <p style="text-align: center;">1</p> <p>Number <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)</p>		
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p>Treasurer's Office - table in front office</p>			<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Actual correspondence is filed in cabinet in back office.</p>		
<p>15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(If Yes, cite Law(s) & Regulation(s))</p>			<p>16. Audit Requirements</p> <p><input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent</p>		
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			<p>18. Recommended Retention</p> <p><i>2 years after fiscal year</i></p> <p>USE GENERAL FILE RETENTION</p>		
<p>19. Name and Title of Preparer</p> <p>Betty J. Windsor, Head Cashier</p>		<p>20. Telephone Number</p> <p>645-0709 (x709)</p>		<p>21. Date</p> <p>April 29, 1997</p>	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <i>Treas.</i>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <i>Correspondence</i>				5. Earliest Year/Latest Year <i>9/44 - 12/94</i> to <i>1995</i>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <i>1+</i> Number <i>storage box + 1 accordion folder</i> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <i>none</i>		12. File Becomes Inactive After Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)			
13. Current Location(s) (Bldg., Floor, Room) <i>T.O. storeroom</i>		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))		16. Audit Requirements <input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent			
17. Is an Index System Used? (If yes, explain/briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		18. Recommended Retention <i>2 yrs after FY</i> <i>USE GENERAL FILE RETENTION</i>			
19. Name and Title of Preparer <i>Hocking</i>		20. Telephone Number		21. Date	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p> <p>PAGE ____ OF ____</p>	
<p>1. Department/Agency</p> <p style="text-align: center; font-size: 1.5em;"><i>Treas.</i></p>		<p>2. Division</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title</p> <p>Employees leave records</p>				<p>5. Earliest Year/Latest Year</p> <p>1989 to 1995</p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)</p> <p>To record employees leave used and accumulated LEAVES</p> <p>Employees leave records weekly, daily, annual including leave request forms</p> <p>" " " monthly</p> <p>" " " weekly and monthly no longer employed by Charles County Treasurer's Office</p> <p style="text-align: center;">annual</p>					
<p>7. Record Series Format(s)</p> <p><input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input checked="" type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p style="text-align: center;">1 Number</p> <p><input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (specify) _____ Box</p>	
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly</p> <p>Current files</p>		<p>12. File Becomes Inactive After</p> <p style="text-align: center;">_____ Number <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)</p>			
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p>Treasurer's Office - <i>store room</i></p>		<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>weekly no - monthly yes - <i>Personnel</i></p>			
<p>15. Access Restrictions <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>(If Yes, cite Law(s) & Regulation(s))</p>		<p>16. Audit Requirements</p> <p><input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent</p>			
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Employees Name</p>		<p>18. Recommended Retention</p> <p style="font-size: 1.2em;"><i>Personnel ></i></p> <p style="font-size: 1.2em;"><i>RETAIN FOR 3 yrs AND UNTIL</i></p> <p style="font-size: 1.2em;"><i>ALL ALL AUDIT REQUIREMENTS</i></p> <p style="font-size: 1.2em;"><i>HAVE BEEN FULFILLED,</i></p> <p style="font-size: 1.2em;"><i>Then Destroy</i></p>			
<p>19. Name and Title of Preparer</p>		<p>20. Telephone Number</p>		<p>21. Date</p>	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p> <hr/> <p>PAGE ____ OF ____</p>	
<p>1. Department/Agency <i>Treas.</i></p>		<p>2. Division</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title Employees leave records</p>				<p>5. Earliest Year/Latest Year ____ to <u>1997</u></p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)</p> <p>To record employees leave used and accumulated (<i>FORMS</i>) Employees leave records weekly " " " monthly</p>					
<p>7. Record Series Format(s)</p> <p><input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input checked="" type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p style="text-align: center;"><u>1</u> Number</p> <p><input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____</p>	
<p>11. File is Used</p> <p><input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly Current files</p>		<p>12. File Becomes Inactive After</p> <p style="text-align: center;">____ Month(s) <input checked="" type="checkbox"/> Year(s) Number fiscal year</p>			
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p>Treasurer's Office - <i>file cabinet in back</i></p>		<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No weekly no- monthly yes - <i>Personnel</i></p>			
<p>15. Access Restrictions <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))</p>		<p>16. Audit Requirements</p> <p><input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent</p>			
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Employees name</p>		<p>18. Recommended Retention</p> <p><i>Personnel</i> RETAIN FOR 3 YRS AND UNTIL ALL AUDITING REQUIREMENTS HAVE BEEN FULFILLED, THEN DESTROY.</p>			
<p>19. Name and Title of Preparer</p>		<p>20. Telephone Number</p>		<p>21. Date <i>DESTROY</i></p>	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
<p>1. Department/Agency Charles County Government</p>		<p>2. Division Treasurer's Office</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title Bank Deposit Log <i>and Deposit Slips</i></p>				<p>5. Earliest Year/Latest Year <i>8/94 to Present</i></p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)</p> <p>Binder that contains date, cashier name and code, amount of deposit. Each cashier inputs this information daily for each deposit.</p> <p><i>Older files may also contain disbursement information log for investments.</i></p>					
<p>7. Record Series Format(s)</p> <p><input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input checked="" type="checkbox"/> Other (specify) <i>Binder</i></p>		<p>8. Record Series Sequence</p> <p><input type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input checked="" type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p style="text-align: right;"> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel <input type="checkbox"/> Computer Tape <input type="checkbox"/> Other (specify) </p> <p><i>1</i> Number <i>Binder</i></p> <p>10. Annual Accumulation</p> <p><i>Less than</i> <i>1 Binder</i> Number</p> <p style="text-align: right;"> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel <input type="checkbox"/> Computer Tape <input type="checkbox"/> Other (specify) </p>	
<p>11. File is Used</p> <p><input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly</p>			<p>12. File Becomes Inactive After</p> <p><i>1</i> Number <i>when filled</i></p> <p style="text-align: right;"> <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s) </p>		
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p><i>Treas. office - table in cashier section</i></p>			<p>14. Is Record Series Duplicated Elsewhere?</p> <p>(If yes, specify agency or office) <i>Fiscal Services - Bank Stmt Treas. records</i></p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>		
<p>15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(If Yes, cite Law(s) & Regulation(s))</p>			<p>16. Audit Requirements</p> <p><input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent</p>		
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			<p>18. Recommended Retention <i>RETAIN FOR 3 1/2</i></p> <p><i>year after fiscal yr.</i></p> <p><i>AND UNTIL ALL Audit Requirements have been fulfilled, then Destroy.</i></p>		
<p>19. Name and Title of Preparer</p> <p>Betty J. Windsor, Head Cashier</p>		<p>20. Telephone Number</p> <p>645-0709 (x709)</p>		<p>21. Date</p> <p>April 30, 1997</p>	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <div style="text-align: center; font-size: 1.5em;">Treas</div>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <i>Bank deposit Log</i> <i>General Fund Cash Balance Ledger</i>				5. Earliest Year/Latest Year <div style="text-align: center;"> <i>4/93</i> to <i>8/94</i> </div>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <div style="text-align: center; font-size: 1.2em;"> <i>Manual Ledger of Deposits & Disbursements</i> </div>					
7. Record Series Format(s) <input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input checked="" type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <div style="text-align: center;"> <i>1</i> Number </div> <div style="text-align: right; font-size: 0.8em;"> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____ </div>	
10. Annual Accumulation <div style="text-align: center;"> <i>None</i> Number </div> <div style="text-align: right; font-size: 0.8em;"> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____ </div>					
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <div style="text-align: center; font-size: 1.2em;"> <i>None</i> </div>			12. File Becomes Inactive After <div style="text-align: center;"> _____ Number </div> <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)		
13. Current Location(s) (Bldg., Floor, Room) <div style="text-align: center; font-size: 1.2em;"> <i>P.O. storeroom</i> </div>			14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))			16. Audit Requirements <div style="text-align: center;"> <input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent </div>		
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			18. Recommended Retention <div style="text-align: center; font-size: 1.5em;"> <i>5 yrs. after FY</i> </div>		
19. Name and Title of Preparer <div style="text-align: center; font-size: 1.5em;"> <i>Hocking</i> </div>		20. Telephone Number		21. Date	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <div style="text-align: center; font-size: 1.5em;">T.O.</div>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <div style="font-size: 1.2em;">Deposit Slips</div>				5. Earliest Year/Latest Year <div style="font-size: 1.2em;">11/1/94 to present</div>	
6. Record Series Description (Briefly describe the types of informationn/documents/forms found in the series. Include the purpose or function of the series.) <div style="font-size: 1.5em; text-align: center;">Validated deposit slips from cashiers</div>					
7. Record Series Format(s) <input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input checked="" type="checkbox"/> Other (specify) <div style="text-align: center; font-size: 1.2em;">3" x 8"</div>		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <div style="text-align: center; font-size: 1.5em;">2</div> Number <div style="text-align: center; font-size: 1.2em;">boxes - envelope size</div> <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) </div> <div style="width: 50%;"> 10. Annual Accumulation <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) </div> </div>	
11. File is Used <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly			12. File Becomes Inactive After Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)		
13. Current Location(s) (Bldg., Floor, Room) <div style="font-size: 1.2em;">T.O. window shelf</div>			14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input type="checkbox"/> No		
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))			16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent		
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			18. Recommended Retention <div style="font-size: 1.2em;">RETAIN FOR 3 YRS AND UNTIL AN AUDIT 2 YRS AFTER</div> <div style="font-size: 1.2em;">Requirements have been Fulfilled Then Destroy.</div>		
19. Name and Title of Preparer <div style="font-size: 1.2em;">Hocking</div>		20. Telephone Number		21. Date	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <div style="font-size: 1.5em; font-family: cursive;">Treas</div>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <div style="font-size: 1.5em; font-family: cursive;">Deposit Slips</div>				5. Earliest Year/Latest Year to 11/1/96 6/1/90 -	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)					
7. Record Series Format(s) <input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input checked="" type="checkbox"/> Other (specify) <div style="font-size: 1.2em; font-family: cursive;">3" x 5"</div>		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify)		9. Volume <div style="font-size: 1.5em; font-family: cursive;">3</div> Number <div style="font-size: 1.2em; font-family: cursive;">storage boxes</div>	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <div style="font-size: 1.2em; font-family: cursive;">none</div>		12. File Becomes Inactive After Number <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)			
13. Current Location(s) (Bldg., Floor, Room) <div style="font-size: 1.5em; font-family: cursive;">7.0. storeroom</div>		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input type="checkbox"/> No <div style="font-size: 1.2em; font-family: cursive;">Acctg?</div>			
15. Access Restrictions <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))		16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent			
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input type="checkbox"/> No		18. Recommended Retention <div style="font-size: 1.5em; font-family: cursive;">2 yrs after FY</div>			
19. Name and Title of Preparer <div style="font-size: 1.5em; font-family: cursive;">Hocking</div>		20. Telephone Number		21. Date	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <div style="font-size: 1.5em; margin-left: 100px;"><i>Meas.</i></div>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <div style="font-size: 1.2em; margin-left: 20px;"><i>Electronic Stop Puts</i></div>				5. Earliest Year/Latest Year <div style="margin-left: 20px;"><i>3/10/95 to 10/27/96</i></div>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____ </div> <div> Number <i>1</i> <div style="margin-left: 20px;"><i>file</i></div> </div> </div>	
10. Annual Accumulation <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____ </div> <div> Number <i>1</i> <div style="margin-left: 20px;"><i>file</i></div> </div> </div>					
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <div style="margin-left: 100px;"><i>seldom</i></div>			12. File Becomes Inactive After <div style="display: flex; justify-content: space-between;"> <div> Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s) </div> </div>		
13. Current Location(s) (Bldg., Floor, Room) <div style="margin-left: 20px;"><i>shelf - data cabinet back of room</i></div>			14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <div style="margin-left: 20px;"><i>Acctg. division</i></div>		
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))			16. Audit Requirements <input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent		
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			18. Recommended Retention <div style="margin-left: 100px;"><i>1 yr after FY</i></div>		
19. Name and Title of Preparer <div style="margin-left: 20px;"><i>A Hocking</i></div>		20. Telephone Number		21. Date	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p> <p>PAGE ____ OF ____</p>	
<p>1. Department/Agency <i>Meas.</i></p>		<p>2. Division</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title <i>Copies of Handout checks & requesting documents</i></p>				<p>5. Earliest Year/Latest Year <i>3/17/95 to 3/29/97</i></p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)</p>					
<p>7. Record Series Format(s)</p> <p><input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input checked="" type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p><input type="checkbox"/> File Drawer(s)</p> <p><input type="checkbox"/> Microfilm Reel(s)</p> <p><input type="checkbox"/> Computer Tape(s)</p> <p><input type="checkbox"/> Other (specify)</p> <p><u>1</u> Number <i>file</i></p>	
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly</p> <p><i>seldom</i></p>		<p>12. File Becomes Inactive After</p> <p><u> </u> Number <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)</p>			
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p><i>2nd shelf - data cabinet</i></p>		<p>14. Is Record Series Duplicated Elsewhere?</p> <p>(If yes, specify agency or office)</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Acctg owner</i></p>			
<p>15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(If Yes, cite Law(s) & Regulation(s))</p>		<p>16. Audit Requirements</p> <p><input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal Independent</p>			
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>18. Recommended Retention</p> <p><i>2 yrs after FY</i></p>			
<p>19. Name and Title of Preparer</p> <p><i>A. Hocking</i></p>		<p>20. Telephone Number</p>		<p>21. Date</p>	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
<p>1. Department/Agency <i>Treas.</i></p>		<p>2. Division</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title <i>Wire and ACH Transfers</i></p>				<p>5. Earliest Year/Latest Year <i>93 to 97</i></p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p><i>Bd & Ed Payroll Civil Union Sheriff's Dept. Interview</i></p> </div> <div style="width: 45%;"> <p><i>Out Src prints PE Fax spinning</i></p> </div> </div>					
<p>7. Record Series Format(s)</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p><input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p> </div> <div style="width: 45%;"> <p>8. Record Series Sequence</p> <p><input type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input checked="" type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p> </div> </div>		<p>9. Volume</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>Number <i>Box</i></p> </div> <div style="width: 45%;"> <p><input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify)</p> </div> </div>			
<p>11. File is Used</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly</p> <p><i> seldom</i></p> </div> <div style="width: 45%;"> <p>12. File Becomes Inactive After</p> <p>Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)</p> </div> </div>		<p>10. Annual Accumulation</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>Number <i>Box</i></p> </div> <div style="width: 45%;"> <p><input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify)</p> </div> </div>			
<p>13. Current Location(s) (Eldg., Floor, Room)</p> <p><i>shelf</i></p>		<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Acc 4g</i></p>			
<p>15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))</p>		<p>16. Audit Requirements</p> <p><input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent</p>			
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>18. Recommended Retention</p> <p><i>2 yr after FY</i></p>			
<p>19. Name and Title of Preparer</p> <p><i>Ms. [unclear]</i></p>		<p>20. Telephone Number</p>		<p>21. Date</p>	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
1. Department/Agency		2. Division		3. Unit	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
4. Record Series Title				5. Earliest Year/Latest Year	
<p><i>MISC. WIND DAMAGE</i></p>				<p>____ to ____ <i>1972 to 1973</i></p>	
<p>6. Record Series Description (Briefly describe the types of informationn/documents/forms found in the series. Include the purpose or function of the series.)</p> <p><i>Misc. Wind Damage - DBT SVC Pmt, Flex Spending</i></p>					
<p>7. Record Series Format(s)</p> <p><input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input checked="" type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p>_____ Number <i>file</i></p> <p><input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify)</p>	
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly</p>		<p>12. File Becomes Inactive After</p> <p>_____ Number</p> <p><input checked="" type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)</p>			
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p><i>SH of Bldg 2010</i></p>		<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>			
<p>15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(If Yes, cite Law(s) & Regulation(s))</p>		<p>16. Audit Requirements</p> <p><input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent</p>			
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>18. Recommended Retention</p> <p><i>2 yrs after FY</i></p>			
19. Name and Title of Preparer		20. Telephone Number		21. Date	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				PAGE ____ OF ____	
1. Department/Agency <i>D.O.</i>		2. Division		3. Unit	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
4. Record Series Title <i>W. L. & P. ...</i>				5. Earliest Year/Latest Year <i>11/94 to 6/95</i>	
6. Record Series Description (Briefly describe the types of informationn/documents/forms found in the series. Include the purpose or function of the series.) <i>W. L. & P. ...</i>					
7. Record Series Format(s)		8. Record Series Sequence		9. Volume	
<input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		<input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		<input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____ Number <i>1</i>	
				10. Annual Accumulation <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____ Number <i>1</i>	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly			12. File Becomes Inactive After Number _____ <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)		
13. Current Location(s) (Bldg., Floor, Room) <i>...</i>			14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))			16. Audit Requirements <input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent		
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			18. Recommended Retention <i>...</i>		
19. Name and Title of Preparer		20. Telephone Number		21. Date	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <div style="text-align: center; font-size: 1.5em;">T.O.</div>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <div style="font-size: 1.2em;">Letter Size - ACC 7071</div>				5. Earliest Year/Latest Year <div style="font-size: 1.2em;">7/05 to 6/96</div>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <div style="text-align: right;"> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____ </div> <div style="text-align: center;"> Number file </div>	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly		12. File Becomes Inactive After <div style="text-align: center;"> Number _____ </div> <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)			
13. Current Location(s) (Bldg., Floor, Room) <div style="font-size: 1.2em;">S... ..</div>		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))		16. Audit Requirements <input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent			
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		18. Recommended Retention <div style="font-size: 1.2em;">5 yr. g.l. FY</div>			
19. Name and Title of Preparer		20. Telephone Number		21. Date	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <div style="text-align: center; font-size: 1.5em;">Treas.</div>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <div style="font-size: 1.2em;">BOE Wire Transfers</div>				5. Earliest Year/Latest Year <div style="font-size: 1.2em;">10/16/92 to 12/28/95</div>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <div style="display: flex; justify-content: space-between;"> <div>Number <div style="font-size: 1.5em;">1</div></div> <div> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____ </div> </div> <div style="margin-top: 10px;"> <div>Number <div style="font-size: 1.5em;">1</div></div> <div> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____ </div> </div>	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <div style="text-align: center; font-size: 1.5em;">seldom</div>			12. File Becomes Inactive After <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s) <div style="display: flex; justify-content: space-between;"> <div>Number _____</div> <div></div> </div>		
13. Current Location(s) (Bldg., Floor, Room) <div style="font-size: 1.2em;">1st shelf Data Cab</div>			14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <div style="font-size: 1.2em;">owner of record</div>		
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))			16. Audit Requirements <input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent		
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			18. Recommended Retention <div style="font-size: 1.5em; text-align: center;">2yr after FY</div>		
19. Name and Title of Preparer <div style="font-size: 1.2em;">A. Hocking</div>		20. Telephone Number		21. Date	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <i>Treas.</i>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <i>NB P/R Wires</i>				5. Earliest Year/Latest Year <i>7/15/94 to 6/21/96</i>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <i>P/R, Credit Union (SECUR) Sheriff's Dept Retiree</i>					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) Number <i>1</i> <i>file</i>	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <i>seldom</i>		12. File Becomes Inactive After Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)			
13. Current Location(s) (Bldg., Floor, Room) <i>1st shelf data cab.</i>		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Acctg owner</i>			
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))		16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent			
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		18. Recommended Retention <i>2 yrs after FY</i>			
19. Name and Title of Preparer <i>A. Hocking</i>		20. Telephone Number		21. Date	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <div style="font-size: 1.5em; font-family: cursive;">Treas.</div>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <div style="font-size: 1.5em; font-family: cursive;">Investment Info.</div>				5. Earliest Year/Latest Year <div style="font-size: 1.5em; font-family: cursive;">83 to 97</div>	
6. Record Series Description (Briefly describe the types of informationn/documents/forms found in the series. Include the purpose or function of the series.) <div style="font-size: 1.5em; font-family: cursive;"> Invest. Purchase sheets Individual Invest. files Security Trust Monthly reports </div>					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Sound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input checked="" type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) <div style="font-size: 1.5em; font-family: cursive;">Box</div>	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <div style="font-size: 1.5em; font-family: cursive;">seldom</div>		12. File Becomes Inactive After <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s) Number _____			
13. Current Location(s) (Bldg., Floor, Room) <div style="font-size: 1.5em; font-family: cursive;">To storeroom/shelves</div>		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <div style="font-size: 1.5em; font-family: cursive;">Acc't</div>			
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))		16. Audit Requirements <div style="font-size: 1.5em; font-family: cursive;">Internal</div> <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent			
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		18. Recommended Retention <div style="font-size: 1.5em; font-family: cursive;">2 yrs. 1/2 FY</div>			
19. Name and Title of Preparer <div style="font-size: 1.5em; font-family: cursive;">Hodder</div>		20. Telephone Number		21. Date	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <i>F.O.</i>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <i>MLGIP 101</i>				5. Earliest Year/Latest Year <i>1919</i> to <i>1919</i>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <i>MLGIP 101 is a series of letters from the Department of General Services to the various departments and agencies regarding the management of records. The series includes information on the filing, retention, and disposition of records.</i>					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____ Number <i>1</i>	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly		12. File Becomes Inactive After Number <i>1</i> <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)			
13. Current Location(s) (Bldg., Floor, Room) <i>Shelved in 70</i>		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))		16. Audit Requirements <input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent			
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		18. Recommended Retention <i>20 years</i>			
19. Name and Title of Preparer		20. Telephone Number		21. Date	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
<p>1. Department/Agency <i>Treas.</i></p>		<p>2. Division</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title <i>Investment Info</i></p>				<p>5. Earliest Year/Latest Year <i>83</i> to <i>94</i></p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)</p> <p><i>Local Govt. Inv. Pool 1/91-6/92, 7/92-1/94 - Acctg (summaries)</i> <i>BO of Ed Transfers-MNB 7/91-6/92 - Acctg</i> <i>Invest Purch sheets FY 92 - Acctg</i> <i>5 yrs - Collateral Pledges 1991-6/93 - Acctg</i> <i>Ind Invest. files - Acctg</i> <i>Security Trust Monthly Rpts 12/88-6/91 - Acctg</i></p>					
<p>7. Record Series Format(s)</p> <p><input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input checked="" type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p><i>1/2</i> Number <i>Box</i></p> <p><input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____</p>	
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly</p> <p><i>seldom</i></p>		<p>12. File Becomes Inactive After</p> <p>Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)</p>			
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p><i>10 storeroom</i></p>		<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Acctg</i></p>			
<p>15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))</p>		<p>16. Audit Requirements <i>Internal</i></p> <p><input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent</p>			
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>18. Recommended Retention:</p> <p><i>Acctg - 2 yrs. after FY</i> <i>Treas - 3 yrs. after FY</i></p>			
<p>19. Name and Title of Preparer</p> <p><i>A Hocking</i></p>		<p>20. Telephone Number</p>		<p>21. Date</p>	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <i>Treasure</i>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes					
4. Record Series Title <i>Misc. General Fund, Check Stub, Purchases</i>				5. Earliest Year/Latest Year <i>Investment 75 to 83</i>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <i>Check Stub, and ?</i>					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume Number <i>Box</i> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel <input type="checkbox"/> Computer Tape <input checked="" type="checkbox"/> Other (specify) _____	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly		12. File Becomes Inactive After Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)			
13. Current Location(s) (Bldg., Floor, Room) <i>Storage Building</i>		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input type="checkbox"/> No			
15. Access Restrictions <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))		16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent			
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		18. Recommended Retention <i>Acc 4?</i>			
19. Name and Title of Preparer		20. Telephone Number		21. Date	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <i>Treas.</i>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <i>Bank stmts.</i>				5. Earliest Year/Latest Year <i>95 to 97</i>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <i>Portfolio Valuation Accumulated Transactions Analysis Stmt General Fund Reconciliation</i>					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____ Number <i>file</i>	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <i>seldom</i>		12. File Becomes Inactive After Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)			
13. Current Location(s) (Bldg., Floor, Room) <i>shift</i>		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Acc. to</i>			
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))		16. Audit Requirements <input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent			
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		18. Recommended Retention <i>2 yrs after FY</i>			
19. Name and Title of Preparer <i>Belton</i>		20. Telephone Number		21. Date	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <i>Meals.</i>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <i>NB Analysis Starts / MNB Act Analysis (became NB)</i>				5. Earliest Year/Latest Year <i>1/31/95 to 12/31/96</i> <i>10/31/94 - 11/30/94</i>	
6. Record Series Description (Briefly describe the types of informationn/documents/forms found in the series. Include the purpose or function of the series.) <div style="text-align: center; font-size: 1.2em; margin-top: 20px;"> <i>Bank Transactions - Fees charged</i> </div>					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <div style="text-align: center;"> <i>1</i> Number </div> <div style="float: right; text-align: right;"> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) <i>shelf</i> </div>	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <div style="text-align: center; margin-top: 10px;"> <i>seldom</i> </div>		12. File Becomes Inactive After <div style="text-align: center;"> _____ Number </div> <div style="float: right;"> <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s) </div>			
13. Current Location(s) (Bldg., Floor, Room) <i>1st shelf data cab.</i>		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <div style="display: flex; justify-content: space-around;"> <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No </div>			
15. Access Restrictions (If Yes, cite Law(s) & Regulation(s)) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		16. Audit Requirements <div style="display: flex; justify-content: space-around;"> <input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent </div>			
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		18. Recommended Retention <div style="text-align: center; margin-top: 20px;"> <i>2 yr after FY</i> </div>			
19. Name and Title of Preparer <i>A. Hocking</i>		20. Telephone Number		21. Date	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <i>Neas.</i>		2. Division _____		3. Unit _____	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <i>NB starts of for information situation / transac</i>				5. Earliest Year/Latest Year <i>3/31/95 to 5/31/96 ending</i>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <i>Per + folio w/ Accum transaction reconciliation</i>					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume Number <i>1</i> <i>file</i> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <i>seldom</i>		12. File Becomes Inactive After Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)			
13. Current Location(s) (Bldg., Floor, Room) <i>1st shelf data cab.</i>		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Acctg owner</i>			
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))		16. Audit Requirements <input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent			
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		18. Recommended Retention <i>7 yrs after FY</i>			
19. Name and Title of Preparer <i>A Hocking</i>		20. Telephone Number _____		21. Date _____	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
<p>1. Department/Agency Charles County Government</p>		<p>2. Division Treasurer's Office</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title Check Log</p>				<p>5. Earliest Year/Latest Year <i>1/20/89 to Present</i></p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)</p> <p>7" x 11.5" ledger book containing dates of check runs, starting and stopping check numbers, date and check numbers for all voided checks and hand cut checks.</p>					
<p>7. Record Series Format(s)</p> <p><input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input checked="" type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input checked="" type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p><input type="checkbox"/> File Drawer(s)</p> <p><input type="checkbox"/> Microfilm Reel(s)</p> <p><input type="checkbox"/> Computer Tape(s)</p> <p><input type="checkbox"/> Other (specify) _____</p> <p><u>1 Book</u> Number</p>	
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly</p>		<p>12. File Becomes Inactive After</p> <p>_____/_____/_____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)</p> <p>Number <i>when filled</i></p>			
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p>Treasurer's Office vault</p>		<p>14. Is Record Series Duplicated Elsewhere?</p> <p>(If yes, specify agency or office)</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Fiscal Svcs automated check register</i></p>			
<p>15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(If Yes, cite Law(s) & Regulation(s))</p>		<p>16. Audit Requirements</p> <p><input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent</p>			
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>18. Recommended Retention <i>RETAIN FOR 1 year after fiscal year, then DESTROY</i></p>			
<p>19. Name and Title of Preparer</p> <p>Betty J. Windsor, Head Cashier</p>		<p>20. Telephone Number</p> <p>645-0709 (x709)</p>		<p>21. Date</p> <p>April 30, 1997</p>	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p> <hr/> <p>PAGE ____ OF ____</p>	
<p>1. Department/Agency Charles County Government</p>		<p>2. Division Treasurer's Office</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title Returned Check Log</p>				<p>5. Earliest Year/Latest Year <i>10/31/74 to Present</i></p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)</p> <p style="text-align: center;"><i>for Prop. Taxes or MVA tags only</i></p> <p>Actual returned checks along with the letter sent to the customer are kept in this binder. The log contains the following information: date check was returned to this office, name of customer, account of relevant account, amount of check date notice was sent to customer, date restitution was made, and the initials of the employee sending letter to the customer.</p>					
<p>7. Record Series Format(s)</p> <p><input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input checked="" type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p style="text-align: right;"> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (specify) _____ </p> <p><u>1</u> Binder Number</p>	
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly</p>		<p>12. File Becomes Inactive After</p> <p>Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)</p>			
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p>Treasurer's Office - table in front office. <i>vault</i></p>		<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Copies of correspondence are also filed in correspondence file in back.</p>			
<p>15. Access Restrictions <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>(If Yes cite Law(s) & Regulation(s)) ?</p>		<p>16. Audit Requirements ?</p> <p><input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent</p>			
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>18. Recommended Retention <i>RETAIN FOR 3 YRS.</i></p> <p>2 YRS <i>3 YRS</i> over</p>			
<p>19. Name and Title of Preparer</p> <p>Betty J. Windsor, Head Cashier</p>		<p>20. Telephone Number</p> <p>645-0709 (x709)</p>		<p>21. Date</p> <p>April 29, 1997</p>	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
<p>1. Department/Agency Charles County Government</p>		<p>2. Division Treasurer's Office</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title Night Depository Log</p>				<p>5. Earliest Year/Latest Year 1/2/97 to Present</p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series. Itemized lists of name, account number, payment type and amount of payment of all items deposited in Night Depository. Daily accounting of all night deposit activity. Night Depository is located on outside of Government Building on adjacent wall to Atrium entrance to building.</p>					
<p>7. Record Series Format(s)</p> <p><input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input checked="" type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p style="text-align: center;">1</p> <p>Number</p> <p>9.5" x 11" expanding file</p> <p><input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify)</p>	
<p>11. File is Used</p> <p><input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly</p>		<p>10. Annual Accumulation</p> <p style="text-align: center;">1</p> <p>Number</p> <p>6" x 9" envelope</p> <p><input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify)</p>			
<p>13. Current Location(s) (Bldg., Floor, Room) Treasurer's Office (on computer desk shelf at Head Cashier's desk)</p>			<p>12. File Becomes Inactive After</p> <p style="text-align: center;">1</p> <p>Number <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)</p>		
<p>15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))</p>			<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			<p>16. Audit Requirements</p> <p><input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent</p>		
<p>19. Name and Title of Preparer Betty J. Windsor, Head Cashier</p>			<p>18. Recommended Retention</p> <p style="font-size: 1.2em; font-family: cursive;">RETAIN FOR 1 year after fiscal year, then DESTROY.</p>		<p>21. Date April 29, 1997</p>
<p>20. Telephone Number 645-0709 (x709)</p>					

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
<p>1. Department/Agency</p> <p>Charles County Government</p>		<p>2. Division</p> <p>Treasurer's Office</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title</p> <p>Night Depository Log</p>				<p>5. Earliest Year/Latest Year</p> <p>1994 to 1996</p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series. Itemized lists of name, account number, payment type and amount of payment of all items deposited in Night Depository. Daily accounting of all night deposit activity.</p>					
<p>7. Record Series Format(s)</p> <p><input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input checked="" type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p style="text-align: center;">3</p> <p>Number <i>6x9 envelope (inside L storage boxes)</i></p> <p><input type="checkbox"/> File Drawer(s)</p> <p><input type="checkbox"/> Microfilm Reel(s)</p> <p><input type="checkbox"/> Computer Tape(s)</p> <p><input checked="" type="checkbox"/> Other (specify)</p>	
				<p>10. Annual Accumulation</p> <p style="text-align: center;">1</p> <p>Number <i>6"x9"</i> Large envelope</p> <p><input type="checkbox"/> File Drawer(s)</p> <p><input type="checkbox"/> Microfilm Reel(s)</p> <p><input type="checkbox"/> Computer Tape(s)</p> <p><input checked="" type="checkbox"/> Other (specify)</p>	
<p>11. File is Used</p> <p><input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly</p>			<p>12. File Becomes Inactive After</p> <p style="text-align: center;">1</p> <p>Number <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)</p>		
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p>Treasurer's Office (inside storage boxes containing UT bills paid in storage room)</p>			<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		
<p>15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(If Yes, cite Law(s) & Regulation(s))</p>			<p>16. Audit Requirements</p> <p><input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent</p>		
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			<p>18. Recommended Retention</p> <p style="text-align: center;">One Year <i>RETAIN FOR after fiscal year THEN DESTROY.</i></p>		
<p>19. Name and Title of Preparer</p> <p>Betty J. Windsor, Head Cashier</p>		<p>20. Telephone Number</p> <p>645-0709 (x709)</p>		<p>21. Date</p> <p>April 22, 1997</p>	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency Charles County Government		2. Division Treasurer's Office		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title Accounts Payable <i>and Section 8</i> Check Registers				5. Earliest Year/Latest Year 1/3/97 to Present	
6. Record Series Description (Briefly describe the types of informationn/documents/forms found in the series. Include the purpose or function of the series. Summary listing of accounts <i>checks</i> paid each week (includes check number and date, vendor number and name, and check amount).					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <div style="text-align: right;"> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) </div> <div style="text-align: center;"> <u>1</u> Number </div> 9.5" x 11" expanding file	
11. File is Used <input type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly		12. File Becomes Inactive After <div style="text-align: center;"> <u>1</u> Number </div> <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)			
13. Current Location(s) (Bldg., Floor, Room) Treasurer's Office (on computer desk shelf at Head Cashier's desk)		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Accounting Office			
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))		16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent			
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		18. Recommended Retention <div style="font-size: 1.2em;"> <i>RETAIN FOR</i> 1 year <i>Then Destroy.</i> </div>			
19. Name and Title of Preparer Betty J. Windsor, Head Cashier		20. Telephone Number 645-0709 (x709)		21. Date April 29, 1997	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
<p>1. Department/Agency Charles County Government</p>		<p>2. Division Treasurer's Office</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title Accounts Payable Check Registers</p>				<p>5. Earliest Year/Latest Year <i>10/21/94 to 12/97/96</i></p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series. Summary listing of accounts paid each week (includes check number and date, vendor number and name, and check amount).</p>					
<p>7. Record Series Format(s)</p> <p><input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input checked="" type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p><input type="checkbox"/> File Drawer(s)</p> <p><input type="checkbox"/> Microfilm Reel(s)</p> <p><input type="checkbox"/> Computer Tape(s)</p> <p><input type="checkbox"/> Other (specify)</p> <p><i>1</i> Number <i>9.5" x 11" exp. file</i></p>	
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly</p>		<p>12. File Becomes Inactive After</p> <p><i>1</i> Number <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)</p>			
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p>Treasurer's Office - on shelf in back office</p>		<p>14. Is Record Series Duplicated Elsewhere?</p> <p>(If yes, specify agency or office)</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Accounting Office</p>			
<p>15. Access Restrictions <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>(If Yes, cite Law(s) & Regulation(s))</p>		<p>16. Audit Requirements</p> <p><input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent</p>			
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>18. Recommended Retention</p> <p><i>RETAIN FOR</i> <i>1 yr after FY, Then</i> <i>DESTROY.</i></p>			
<p>19. Name and Title of Preparer</p> <p>Betty J. Windsor, Head Cashier</p>		<p>20. Telephone Number</p> <p>645-0709 (x709)</p>		<p>21. Date</p> <p>April 22, 1997</p>	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p> <hr/> <p>PAGE ____ OF ____</p>	
<p>1. Department/Agency Charles County Government</p>		<p>2. Division Treasurer's Office</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title Section 8 Check Registers</p>				<p>5. Earliest Year/Latest Year 1/31/96 to Present</p>	
<p>6. Record Series Description (Briefly describe the types of informationn/documents/forms found in the series. Include the purpose or function of the series. Summary listing of accounts paid each month (includes check number and date, vendor number and name, and check amount).</p>					
<p>7. Record Series Format(s)</p> <p><input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input checked="" type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p style="text-align: right;"><input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify)</p> <p style="text-align: center;">1 Number</p> <p>9.5" x 11" expanding file</p> <p>10. Annual Accumulation</p> <p style="text-align: right;"><input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify)</p> <p style="text-align: center;">1 Number</p> <p>9.5" x 11" expanding file (2 years per file)</p>	
<p>11. File is Used</p> <p style="text-align: center;"><input type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly</p>			<p>12. File Becomes Inactive After</p> <p style="text-align: center;">2 Number <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)</p>		
<p>13. Current Location(s) (Bldg., Floor, Room) Treasurer's Office (on computer desk shelf at Head Cashier's desk)</p>			<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Accounting Office</p>		
<p>15. Access Restrictions <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))</p>			<p>16. Audit Requirements</p> <p style="text-align: center;"><input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent</p>		
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p style="text-align: center;"><input type="checkbox"/> Yes <input type="checkbox"/> No</p>			<p>18. Recommended Retention <i>RETAIN FOR 1 yr</i> <i>AFTER FY, THEN DESTROY.</i></p>		
<p>19. Name and Title of Preparer Betty J. Windsor, Head Cashier</p>		<p>20. Telephone Number 645-0709 (x709)</p>		<p>21. Date April 29, 1997</p>	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency Charles County Government		2. Division Treasurer's Office		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title Section 8 Check Registers				5. Earliest Year/Latest Year 1/27/94 to 12/27/95	
6. Record Series Description (Briefly describe the types of informationn/documents/forms found in the series. Include the purpose or function of the series. Summary listing of accounts paid each month (includes check number and date, vendor number and name, and check amount).					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (specify): 9.5" x 11" expanding file	
10. Annual Accumulation <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (specify): 9.5" X 11" expanding file					
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly			12. File Becomes Inactive After Number <u>3</u> <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)		
13. Current Location(s) (Bldg., Floor, Room) Treasurer's Office - on shelf in back office			14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Accounting Office		
15. Access Restrictions <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))			16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent		
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			18. Recommended Retention Retain for 1 yr After FY, then destroy		
19. Name and Title of Preparer Betty J. Windsor, Head Cashier		20. Telephone Number 645-0709 (x709)		21. Date April 22, 1997	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY	
				PAGE ____ OF ____	
1. Department/Agency Charles County Government		2. Division Treasurer's Office		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title MVA Activity Reports + <i>Daily Tag Renewal Report</i>				5. Earliest Year/Latest Year <i>1996</i> to <i>Present</i>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series. Daily activity reports. summaries of tags sold, owners' names, title no., tag number, fees collected, vehicle class, registrations voided, for daily MVA activity in Treasurer's Office Used to reconcile registration renewal forms and fees collected for and sent to Motor Vehicle Administration. <i>Report includes # tags sold state & county fees, and daily total for each category.</i>					
7. Record Series Format(s) <input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input checked="" type="checkbox"/> Other (specify) Computer printouts (12" x 15" expanding file)		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) <i>2</i> Number <i>12" x 15" x 8" + 12" x 15" x</i> 10. Annual Accumulation <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) <i>1</i> Number <i>(12" x 15" x 10" file)</i>	
11. File is Used <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly		12. File Becomes Inactive After <i>6</i> Number <input checked="" type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)			
13. Current Location(s) (Bldg., Floor, Room) Treasurer's Office -- in cabinet under MVA printer in front office.		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Motor Vehicle Administration, Glen Burnie, MD			
15. Access Restrictions <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))		16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent			
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input type="checkbox"/> No		18. Recommended Retention <i>RETAIN FOR 2 YRS AFTER FY, THEN DESTROY.</i> <i>Six months</i> <i>Katey [Signature] [Signature]</i>			
19. Name and Title of Preparer Betty J. Windsor, Head Cashier		20. Telephone Number 645-0709 (x709)		21. Date April 29, 1997	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency Charles County Government		2. Division Treasurer's Office		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title MVA Activity Reports				5. Earliest Year/Latest Year 5-1-92 to 12/95 *	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series. Daily activity reports. Summaries of tags sold, owners' names, title no., tag no., fees collected, vehicle class, registrations voided, for daily MVA activity in Treasurer's Office Used to reconcile registration renewal forms and fees collected for and sent to Motor Vehicle Administration. * Do not have reports for 10/31/92 through 4/30/93 and 10/1/93 through 10/31/93.					
7. Record Series Format(s) <input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input checked="" type="checkbox"/> Other (specify) Computer printouts (12" X 15" expanding file)		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify)		9. Volume <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (specify) (12" x 15" x 8" file) Number 4	
10. Annual Accumulation <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (specify) (12" x 15" x 10" file) Number 1					
11. File is Used <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly 1255			12. File Becomes Inactive After 6 <input checked="" type="checkbox"/> Month(s) <input type="checkbox"/> Year(s) Number		
13. Current Location(s) (Bldg., Floor, Room) Treasurer's Office			14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Motor Vehicle Administration (Glen Burnie)		
15. Access Restrictions <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))			16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent		
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input type="checkbox"/> No			18. Recommended Retention Six months 2005-2010		
19. Name and Title of Preparer Betty J. Windsor, Head Cashier		20. Telephone Number 645-0709 (x709)		21. Date April 22, 1997	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p> <hr/> <p>PAGE ____ OF ____</p>	
<p>1. Department/Agency <i>Treas.</i></p>		<p>2. Division</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title <i>MVA</i></p>				<p>5. Earliest Year/Latest Year <i>1/95-12/95</i> to <i>5/92-10/92</i> <i>11/94-12/94 5/93-9/93</i></p>	
<p>6. Record Series Description (Briefly describe the types of informationn/documents/forms found in the series. Include the purpose or function of the series.) <i>Printouts</i></p>					
<p>7. Record Series Format(s)</p> <p><input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input checked="" type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input checked="" type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p><i>35</i> Number <i>books</i></p> <p><input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify)</p>	
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly</p> <p><i>none</i></p>		<p>12. File Becomes Inactive After</p> <p>Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)</p>			
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p><i>To storeroom</i></p>		<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <i>state MVA</i></p>			
<p>15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(If Yes, cite Law(s) & Regulation(s))</p>		<p>16. Audit Requirements</p> <p><input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent</p>			
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>18. Recommended Retention</p> <p><i>RETAIN for 2yrs after FY, THEN DESTROY.</i></p>			
<p>19. Name and Title of Preparer</p> <p><i>Hocking</i></p>		<p>20. Telephone Number</p>		<p>21. Date</p>	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p> <hr/> <p>PAGE ____ OF ____</p>	
<p>1. Department/Agency Charles County Government</p>		<p>2. Division Treasurer's Office</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title Daily MVA Tag Renewal Ledger</p>				<p>5. Earliest Year/Latest Year 3/19/92 to Present</p>	
<p>6. Record Series Description (Briefly describe the types of informationn/documents/forms found in the series. Include the purpose or function of the series.)</p> <p>Daily ledger includes number of tags sold, MVA fees, state and county fees, and daily total for each cashier. This ledger is used to prepare the weekly check request for money sent MVA in connection with tag renewals purchased at the Charles County Treasurer's Office.</p>					
<p>7. Record Series Format(s)</p> <p><input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input checked="" type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p style="text-align: center;">5</p> <p>Number</p> <p><input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (specify) Tablets</p>	
<p>11. File is Used</p> <p><input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly</p>		<p>12. File Becomes Inactive After</p> <p style="text-align: center;">1</p> <p>Number <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)</p>			
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p>Treasurer's Office - in MVA printer cabinet in front office.</p>		<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			
<p>15. Access Restrictions <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>(If Yes, cite Law(s) & Regulation(s))</p>		<p>16. Audit Requirements</p> <p><input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent</p>			
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>18. Recommended Retention <i>RETAIN FOR 1 yr,</i></p> <p>1 Year. Recommend separate ledger tablet be used for each year, with retention of pervious year only.</p> <p style="text-align: center;"><i>Then Destroy</i></p>			
<p>19. Name and Title of Preparer</p> <p>Betty J. Windsor, Head Cashier</p>		<p>20. Telephone Number</p> <p>645-0709 (x709)</p>		<p>21. Date</p> <p>April 29, 1997</p>	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency Charles County Government		2. Division Treasurer's Office		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title Utility Bills Paid/Accounts Receivable Paid				5. Earliest Year/Latest Year 1/97 to Present	
6. Record Series Description (Briefly describe the types of informationn/documents/forms found in the series. Include the purpose or function of the series. Utility bill document - includes customers name, address, account number, amount billed, late payment amount, and amount paid. <i>Validated by customer, date paid</i> Accounts Receivable - includes customers name, address, customer number, invoice number, amount of payment, type of account, amount paid. <i>Validated by customer, date paid</i>					
7. Record Series Format(s) <input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input checked="" type="checkbox"/> Other (specify) Top portion of bill (3.5" x 8.5")		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify)		9. Volume <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) Number <u>2</u> <i>(Transferred from file drawer to Bankers boxes)</i>	
11. File is Used <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly		12. File Becomes Inactive After Number <u>6</u> <input checked="" type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)			
13. Current Location(s) (Bldg., Floor, Room) Treasurer's Office - file cabinet in back office.		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
15. Access Restrictions <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))		16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent			
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input type="checkbox"/> No		18. Recommended Retention <i>RETAIN FOR 3YRS AND UNTIL ALL AUDIT REQUIREMENTS have been fulfilled, Then Destroy.</i>			
19. Name and Title of Preparer Betty J. Windsor, Head Cashier		20. Telephone Number 645-0709 (x709)		21. Date April 29, 1997	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				PAGE ____ OF ____	
1. Department/Agency Charles County Government		2. Division Treasurer's Office		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title Utility Bills Paid/Accounts Receivable Paid				5. Earliest Year/Latest Year <u>6/94</u> to <u>12/96</u>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) Utility bill document including customers name, address, account number, amount billed, late payment amount, and amount paid. (Usually top portion of bill sent to customer, returned with payment for posting to account.) <i>Utility bills etc.</i> Accounts Receivable - includes customers name, address, customer number, invoice number, amount of payment, type of account, amount paid.					
7. Record Series Format(s)		8. Record Series Sequence		9. Volume	
<input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input checked="" type="checkbox"/> Other (specify) <u>Top portion of bill (3.5" X 8.5")</u>		<input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		<input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (specify) <u>Bankers Boxes</u> <u>13</u> Number	
				10. Annual Accumulation <u>5</u> Number <u>Boxes</u>	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly			12. File Becomes Inactive After <u>10</u> <input checked="" type="checkbox"/> Month(s) <input type="checkbox"/> Year(s) Number		
13. Current Location(s) (Bldg., Floor, Room) Treasurer's Office - Store room			14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
15. Access Restrictions <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))			16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent		
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input type="checkbox"/> No			18. Recommended Retention 1 year		
19. Name and Title of Preparer Betty J. Windsor, Head Cashier		20. Telephone Number 645-0709 (X709)		21. Date April 28, 1997	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
<p>1. Department/Agency Charles County Government</p>		<p>2. Division Treasurer's Office</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title Cashier printer tapes</p>				<p>5. Earliest Year/Latest Year <u>1986</u> to <u>Present</u></p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)</p> <p>Printer tape of cashiers' transactions includes cashier code, date, type of transaction, receipt number, document validation, check validation, and customer receipt. This tape is a carbon copy of the original, which produces the receipt given to the customer. Each printer at each cashier station produces tapes which are stored at that location for a period of six months.</p>					
<p>7. Record Series Format(s)</p> <p><input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input checked="" type="checkbox"/> Other (specify) <u>Printer tape the size of calculator tape.</u></p>		<p>8. Record Series Sequence</p> <p><input type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input checked="" type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p><u>150</u> Number</p> <p><input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (specify) <u>Rolls (approx.)</u></p>	
<p>10. Annual Accumulation</p> <p><u>150</u> Number</p> <p><input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (specify) <u>Rolls / 6 INCHES</u></p>					
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly</p>			<p>12. File Becomes Inactive After</p> <p><u>6</u> <input checked="" type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)</p> <p>Number</p>		
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p>Under each cashier station at front office counter.</p>			<p>14. Is Record Series Duplicated Elsewhere?</p> <p>(If yes, specify agency or office)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		
<p>15. Access Restrictions <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>(If Yes, cite Law(s) & Regulation(s))</p>			<p>16. Audit Requirements</p> <p><input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent</p>		
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			<p>18. Recommended Retention</p> <p><u>RETAIN FOR</u> <u>6 months</u> <u>THEN DESTROY</u></p>		
<p>19. Name and Title of Preparer</p> <p>Betty J. Windsor, Head Cashier</p>		<p>20. Telephone Number</p> <p>645-0709 (x709)</p>		<p>21. Date</p> <p>April 29, 1997</p>	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency Charles County Government		2. Division Treasurer's Office		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title Check Sign-out Cards				5. Earliest Year/Latest Year <u>4/22/94</u> to <u>4/25/97</u>	
6. Record Series Description (Briefly describe the types of informationn/documents/forms found in the series. Include the purpose or function of the series. Date of check run, name on check, amount of check, signature of recipient, initials of person releasing check.					
7. Record Series Format(s) <input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <u>1</u> Number <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (specify) <u>File Folder</u>	
11. File is Used <input type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly		12. File Becomes Inactive After _____ Number <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)			
13. Current Location(s) (Bldg., Floor, Room) Locked cabinet in vault in Treasurer's Office.		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
15. Access Restrictions <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))		16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent			
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input type="checkbox"/> No		18. Recommended Retention <u>RETAIN for 3yrs</u> <u>AND UNTIL ALL Audit</u> <u>Requirements have been</u> <u>Fulfilled, Then Destroy.</u>			
19. Name and Title of Preparer Betty J. Windsor, Head Cashier		20. Telephone Number 645-0709 (x709)		21. Date April 29, 1997	

Instructions -- Type or print a separate form for each new or revised record series.

AGENCY RECORDS INVENTORY

Page ____ of ____

1. Department/Agency
Treasurer's Office

2. Division

3. Unit/Program

DEFINITION: Record Series: a group of related records normally filed and used as a unit for reference as well as retention & disposition purposes.

4. Record Series Title

Property Tax Rolls and Tax Billing Records

5. Earliest Year / Latest Year

to

6. Record Series Description

(Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)

Property tax rolls:

Computer printouts of property owners, account number, and assessment information. Tax billing records also contain amount of taxes billed for the year, type of taxes billed (county, state, special, charges, etc) and date and amount of payments. Billing record information transferred to microfiche periodically.

7. Record Series Format(s)

- ☐ Letter Size ☐ Microfilm
☐ Legal Size ☐ Computer Tape
☐ Bound Book ☐ Floppy Disk
☐ Audio Tape ☐ Video Tape
☐ Other (specify) _____

8. Record Series Sequence

- ☐ Alphabetical
☐ Numerical
☐ Chronological
☐ Geographical
☐ Other (specify) _____

9. Volume

Number

- ☐ File Drawer(s)
☐ Microfilm Reel(s)
☐ Computer Tape(s)
☐ Other (specify) _____

10. Annual
Accumulation

Number

- ☐ File Drawer(s)
☐ Microfilm Reel(s)
☐ Computer Tape(s)
☐ Other (specify) _____

11. File is used:

- ☐ Daily ☐ Weekly ☐ Monthly

12. File becomes inactive after

____ Month(s) ____ Year(s)

13. Current Location(s) (Building, Floor, Room)

xx
xx
xx

14. Is record series duplicated elsewhere?

☐ Yes ☒ No (If yes, specify agency or office)

x
x

15. Access Restrictions

☐ Yes ☒ No (If yes, cite law(s) and regulation(s))

x
x

16. Audit Requirements ☐ None

☐ State ☐ Federal ☐ Independent
County

17. Is an index system used?

☐ Yes ☒ No

(If yes, explain briefly and describe any hardware/software)

x
x

18. Recommended retention

Tax Rolls-retain for 3 years after FY, then destroy.
Tax Billing Records-retain for 50 years after FY, then destroy.

19. Name and Title of Preparer

Adair M. Hocking
Title: *Deputy Treasurer*

20. Telephone Number

301-645-0712

21. Date

2/9/98

OK

DEPARTMENT OF GENERAL SERVICES
RECORDS MANAGEMENT DIVISION
7275 WATERLOO ROAD
P.O. BOX 275
JESSUP, MARYLAND 20794

AGENCY RECORDS INVENTORY

PAGE ____ OF ____

Instructions - Type or Print a separate form for each
new or revised record series, forward with Record
Retention Schedule (DGS 550-1)

1. Department/Agency

Treas.

2. Division

3. Unit

DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.

4. Record Series Title

Tax Information & Ledgers

5. Earliest Year/Latest Year

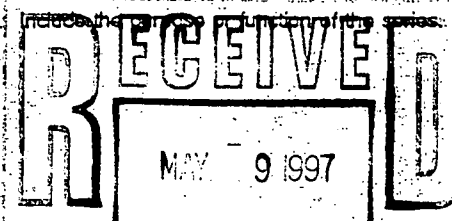
see # 6

6. Record Series Description (Briefly describe the types of information/documents/forms found in the series.)

Real Estate Taxes 1966-79 & 82-93
Corp Taxes 89-92
BPP Taxes 84-85 & 89-92
Public Utilities 89-92
City Bonds 80-81
Fixed Assets 80-81
Check Register 74-79
Voided Checks 74-79

Section 8 77-79
Revenue Ledger 74-81
Budget Ledger 74-81
General Ledger 75-81
Anticipated Rev. 77-79
Special Rev. 80-81

Arch Records



7. Record Series Format(s)

- ☐ Letter Size
- ☒ Microfilm
- ☐ Legal Size
- ☐ Computer Tape
- ☐ Bound Book
- ☐ Floppy Disk
- ☐ Audio Tape
- ☐ Video Tape
- ☐ Other (specify)

8. Record Series Sequence

- ☐ Alphabetical
- ☐ Numerical
- ☒ Chronological
- ☐ Geographical
- ☐ Other (specify)

9. Volume

- ☐ File Drawer(s)
 - ☐ Microfilm Reel(s)
 - ☐ Computer Tape(s)
 - ☒ Other (specify)
- 4
Number
8x13 microfiche cards

10. Annual Accumulation

- ☐ File Drawer(s)
 - ☐ Microfilm Reel(s)
 - ☐ Computer Tape(s)
 - ☒ Other (specify)
- 93 was the last year for

11. File is Used

- ☐ Daily
- ☐ Weekly
- ☐ Monthly

When Needed

12. File Becomes Inactive After

- Number
- ☐ Month(s)
- ☐ Year(s)

13. Current Location(s)

(Bldg., Floor, Room)

T.O. storeroom

14. Is Record Series Duplicated Elsewhere?

- (If yes, specify agency or office)
- ☐ Yes
- ☒ No

15. Access Restrictions

(If Yes, cite Law(s) & Regulation(s))

- ☐ Yes
- ☒ No

16. Audit Requirements

- ☐ None
- ☐ State
- ☐ Federal
- ☒ Independent

17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)

- ☐ Yes
- ☒ No

18. Recommended Retention

over
Permanent

19. Name and Title of Preparer

20. Telephone Number

21. Date

TAX ROLLS - PERMANENT, TRANSFER
PERIODICALLY TO THE N.Y. STATE
ARCHIVES.

ACCOUNTING RECORDS - RETAIN FOR 3 YRS.
AND UNTIL ALL AUDIT REQUIREMENTS
HAVE BEEN FULFILLED, THEN DESTROY.

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <div style="text-align: center; font-size: 1.5em;">Meas.</div>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <i>Microfiche Tax Billing Records</i> <i>Tax Cards - (Binders)</i>				5. Earliest Year/Latest Year <i>1950 to 1965 &</i> <i>1979 - 1982</i>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <i>Binders w/ tax billing information</i> <div style="text-align: center; font-size: 1.5em;">Tax Rolls</div>					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input checked="" type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input checked="" type="checkbox"/> Other (specify) <i>District</i>		9. Volume <div style="text-align: center; font-size: 1.5em;">137</div> Number <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (specify) <i>Binders</i>	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <div style="text-align: center; font-size: 1.5em;">When Needed</div>		12. File Becomes Inactive After Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)			
13. Current Location(s) (Bldg., Floor, Room) <div style="text-align: center; font-size: 1.5em;">T.O. Conf. room</div>		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))		16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent			
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		18. Recommended Retention <div style="text-align: center; font-size: 1.5em;">Permanent; Transfer Periodically To The NAB.</div>			
19. Name and Title of Preparer		20. Telephone Number		21. Date <i>STATE Archives</i>	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <i>Meas.</i>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <i>HBCC or HBCS Homeowners Homestead Tax roll, Homeowners Credit Tax Roll, Tax roll Real property, BPP tax roll, Corp tax roll, Public utility, mass update to Assmt roll, credit entry report,</i>				5. Earliest Year/Latest Year ____ to ____	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <div style="text-align: center; font-size: 1.5em;"> <i>See attached</i> Tax Rolls </div>					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input checked="" type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <div style="text-align: center; font-size: 1.5em;"> 66 </div> Number <i>binders</i> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (specify)	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly		12. File Becomes Inactive After Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)			
13. Current Location(s) (Bldg., Floor, Room) <i>T.O. file cabinet</i>		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))		16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent			
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		18. Recommended Retention <div style="text-align: center; font-size: 1.2em;"> <i>RETAIN FOR</i> <i>5 yr after FY, Then</i> <i>DESTROY</i> </div>			
19. Name and Title of Preparer		20. Telephone Number		21. Date	

Supplemental Tax Billing

96-97

Special Assessments

95/96

96/97

91/92 - FF

89/90 FF

92/93 - FF

90/91 FF

92 half yr FF
Surrender

93/94

Mass Billing

95/96

94/95

94/95 - services

New Property

Full year Totals

August 96/97 95/96 94/95 93/93 93/94

April 96/97

96-97 95/96 94/95

93/94
92/93 Tax Roll Dist. 6 / Dist 7.89, 1-4

January 96/97 94/95 95/96 93/94 93/93

October 96/97

F

Circuit Breaker Tax Credits

96-97

95-96

92-93

Public Utility Certification

95-96

96-97

94-95

Corporations Certifications

96-97

7-95 to 12-95 95/96

92/93

93/94

94/95

82-85 Manual

Business Personal Properties

96-97

95-96

94/95

93/94

92/93

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
1. Department/Agency <i>Treasurer's</i>		2. Division		3. Unit	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
4. Record Series Title <i>Tax Roll - Permanent?</i>				5. Earliest Year/Lastest Year <i>1984 to 1985</i>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <i>Computer printout</i>					
7. Record Series Format(s)		8. Record Series Sequence		9. Volume	
<input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input checked="" type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		<input checked="" type="checkbox"/> Alphabetical <input checked="" type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		<input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (specify) <i>Binders</i> Number <i>8</i>	
				10. Annual Accumulation	
				<input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____ Number _____	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly			12. File Becomes Inactive After Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)		
13. Current Location(s) (Bldg., Floor, Room) <i>Storage Building</i>			14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
15. Access Restrictions <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))			16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent		
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			18. Recommended Retention <i>RETAIN FOR 5 yr after FY, Then DESTROY</i>		
19. Name and Title of Preparer		20. Telephone Number		21. Date	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <i>Treasury</i>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <i>Tax Roll Business Personal Property, & Corporations</i>				5. Earliest Year/Latest Year <i>82 to 85</i>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <div style="text-align: center; font-size: 1.2em; margin-top: 20px;"> <i>Computer printouts</i> </div>					
7. Record Series Format(s) <input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input checked="" type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input checked="" type="checkbox"/> Alphabetical <input checked="" type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (specify) </div> <div style="text-align: center;"> <div style="border-bottom: 1px solid black; width: 50px; margin: 0 auto;">2</div> <div style="margin-top: 5px;">Number</div> </div> </div> <div style="margin-top: 10px; text-align: center; font-size: 1.2em;"> <i>Binder 5</i> </div>	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly		12. File Becomes Inactive After <div style="display: flex; justify-content: space-between;"> <div> <div style="border-bottom: 1px solid black; width: 50px; margin: 0 auto;"></div> <div style="margin-top: 5px;">Number</div> </div> <div> <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s) </div> </div>			
13. Current Location(s) (Bldg., Floor, Room) <div style="text-align: center; font-size: 1.2em; margin-top: 10px;"> <i>Storage Building</i> </div>		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency/office) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
15. Access Restrictions <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))		16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent			
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		18. Recommended Retention <div style="text-align: center; font-size: 1.2em; margin-top: 20px;"> <i>RETAIN for 5 yr after FY, Then DESTROY.</i> </div>			
19. Name and Title of Preparer		20. Telephone Number		21. Date	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY	
		PAGE ____ OF ____			
1. Department/Agency <i>Treasurers</i>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <i>Numerical Cross Reference</i>				5. Earliest Year/Latest Year <i>83 to 84 Accts. Deleted</i> <i>86-87 Assessment</i>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <div style="text-align: center; font-size: 1.2em;"> <i>Computer printouts</i> <i>Accts deleted</i> <i>Assessment rolls</i> </div>					
7. Record Series Format(s) <input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input checked="" type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input checked="" type="checkbox"/> Alphabetical <input checked="" type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <div style="text-align: center; font-size: 1.5em;"> <i>2</i> </div> Number <div style="float: right; text-align: right;"> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (specify) <div style="font-size: 1.2em; margin-top: 5px;"> <i>Binders</i> </div> </div>	
10. Annual Accumulation <div style="text-align: center; font-size: 1.5em;"> _____ </div> Number <div style="float: right; text-align: right;"> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____ </div>					
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly			12. File Becomes Inactive After <div style="text-align: center; font-size: 1.5em;"> _____ </div> Number <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)		
13. Current Location(s) (Bldg., Floor, Room) <div style="font-size: 1.5em; margin-top: 10px;"> <i>Storage Building</i> </div>			14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
15. Access Restrictions <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))			16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent		
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			18. Recommended Retention <div style="font-size: 1.2em; margin-top: 10px;"> <i>RETAIN FOR</i> <i>5 yr after FY, Then</i> <i>DESTROY.</i> </div>		
19. Name and Title of Preparer		20. Telephone Number		21. Date	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)

DEPARTMENT OF GENERAL SERVICES
RECORDS MANAGEMENT DIVISION
7275 WATERLOO ROAD
P.O. BOX 275
JESSUP, MARYLAND 20794

AGENCY RECORDS INVENTORY

PAGE ____ OF ____

1. Department/Agency

Measure's

2. Division

3. Unit

DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.

4. Record Series Title

Homeowner Tax Credit
Additions, Abatements - CB Credits

5. Earliest Year/Latest Year

85 to 87
84-85 Homeowner
Tax Credit

6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)

Computer printouts

Tax Roll

7. Record Series Format(s)

- ☐ Letter Size ☐ Microfilm
☐ Legal Size ☐ Computer Tape
☒ Sound Book ☐ Floppy Disk
☐ Audio Tape ☐ Video Tape
☐ Other (specify) _____

8. Record Series Sequence

- ☒ Alphabetical
☐ Numerical
☐ Chronological
☐ Geographical
☐ Other (specify) _____

9. Volume

- ☐ File Drawer(s)
☐ Microfilm Reel(s)
☐ Computer Tape(s)
☒ Other (specify)

3
Number Binders

10. Annual Accumulation

- ☐ File Drawer(s)
☐ Microfilm Reel(s)
☐ Computer Tape(s)
☐ Other (specify)

1 and 2
Number

11. File is Used

- ☐ Daily ☐ Weekly ☐ Monthly

None

12. File Becomes Inactive After

- _____
Number ☐ Month(s) ☐ Year(s)

13. Current Location(s) (Bldg., Floor, Room)

Storage Building

14. Is Record Series Duplicated Elsewhere?

- (If yes, specify agency or office)
☐ Yes ☒ No

15. Access Restrictions ☐ Yes ☐ No
(If Yes, cite Law(s) & Regulation(s))

16. Audit Requirements

- ☐ None ☐ State ☐ Federal ☒ Independent

17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)

- ☐ Yes ☒ No

18. Recommended Retention

Retain for
3 yrs after FY, Then
Destroy

19. Name and Title of Preparer

20. Telephone Number

21. Date

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
<p>1. Department/Agency <i>Treas.</i></p>		<p>2. Division</p>		<p>3. Unit <i>Expendables?</i></p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title <i>Corporation Business Personal Property Office</i> <i>Utilities write off (Exp Property Article Title 4-401)</i></p>				<p>5. Earliest Year/Latest Year <i>1984 to 1990</i> <i>1996 1997 write off</i></p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <i>Reports to write off uncollectible Corporation, Business Personal property & Public Utilities Taxes. Copy of each taxpayer's tax inquiry, return, query, reports and amount of tax owed, with receivable reports on all unpaid balances</i></p>					
<p>7. Record Series Format(s)</p> <p><input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input checked="" type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p><i>1</i> Number</p> <p><input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____</p>	
				<p>10. Annual Accumulation</p> <p><i>1</i> Number</p> <p><input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____</p> <p><i>file folder</i></p>	
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly</p>			<p>12. File Becomes Inactive After</p> <p>Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)</p>		
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p><i>T.O. - file cabinet in back</i></p>			<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		
<p>15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))</p>			<p>16. Audit Requirements</p> <p><input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent</p>		
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			<p>18. Recommended Retention</p> <p><i>25 yrs after FY of W/O</i> <i>or until all audit requirements are met</i></p>		
<p>19. Name and Title of Preparer</p>		<p>20. Telephone Number</p>		<p>21. Date</p>	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
1. Department/Agency <i>Treas.</i>		2. Division		3. Unit	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
4. Record Series Title <i>Tax Property Maintenance Files</i>				5. Earliest Year/Latest Year ____ to ____	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)</p> <p><i>Address Changes</i> <i>Transfers - changes in ownership</i> <i>Set up sheets - create new tax accounts</i> <i>Additions/Abatement assessment notices -</i> <i>Certifications - personal property billings including public utilities</i> <i>Homesite credit adjustments</i></p>					
7. Record Series Format(s)		8. Record Series Sequence		9. Volume	
<input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		<input checked="" type="checkbox"/> Alphabetical <input checked="" type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		<input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____ <i>boxes</i>	
				10. Annual Accumulation	
				<input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <i>when needed</i>			12. File Becomes Inactive After _____ Number <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)		
13. Current Location(s) (Bldg., Floor, Room) <i>T.O.</i>			14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))			16. Audit Requirements <input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent		
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			18. Recommended Retention <i>Indefinite + 72 months - after 5 yrs. after destruction</i> <i>Additions - return for 2 yrs. for disposition</i>		
19. Name and Title of Preparer <i>Noel...</i>		20. Telephone Number		21. Date	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <i>Mass.</i>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <i>Transfers</i>				5. Earliest Year/Latest Year _____ to _____ <i>1991</i>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <div style="text-align: center; font-size: 1.2em;"> <i>Property Transfer sheets</i> </div>					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input checked="" type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____ </div> <div> <i>1</i> Number <i>Storage box</i> </div> </div>	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <div style="text-align: center;"><i>none</i></div>		12. File Becomes Inactive After <div style="display: flex; justify-content: space-between;"> <div> Number _____ <input type="checkbox"/> Month(s) </div> <div> <input type="checkbox"/> Year(s) </div> </div>			
13. Current Location(s) (Bldg., Floor, Room) <i>Auditorium storage</i>		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>SDAT</i>			
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))		16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent			
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		18. Recommended Retention <div style="text-align: center; font-size: 1.2em;"> <i>RETAIN FOR 5 yrs after FY, Then DESTROY.</i> </div>			
19. Name and Title of Preparer <i>Hocking</i>		20. Telephone Number		21. Date	

TRANSFERS - Retain for 5 yrs After FY,
Then Destroy.

Address Changes - Retain for 3 yrs After
FY, Then Destroy.

Dead Files - ^{Redemptions -} Retain for 5 yrs After
Redeemed, Then Destroy.
Until all audits have been fulfilled.

Dead Files -

Foreclosures - ~~Permanently Transfer~~
~~Periodically to the Nat. State~~

~~Archives~~ - Retain for 25 yrs after
foreclosure. Then destroy
until all audits have been fulfilled.

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <div style="text-align: center; font-size: 1.5em;">Treas;</div>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <div style="text-align: center;">1994</div> Set up Sheets / 94 Add changes / Correspondence				5. Earliest Year/Latest Year <div style="text-align: center;">7/93 to 95</div>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) New Acct Set up sheets - To create new tax accts 6th Dist address changes - Make changes for a current mailing address Correspondence - incoming/outgoing responses concerning tax accts					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size 11" x 8 1/2" <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input checked="" type="checkbox"/> Other (specify) address - tax bills, Assmt + notices letters		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input checked="" type="checkbox"/> Other (specify) District		9. Volume <div style="text-align: center;">1 box</div> Number <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (specify)	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <div style="text-align: center;">When Needed</div>		12. File Becomes Inactive After <div style="text-align: center;">Number</div> <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)			
13. Current Location(s) (Bldg., Floor, Room) <div style="text-align: center;">T.O.</div>		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No - Correspondence Set up Sheets / Address			
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))		16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent			
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		18. Recommended Retention <div style="text-align: center;"> RETAIN for 2 1/2 yrs after Add - 2 yrs after FY, Then DESTROY Corresp - 2 yrs after FY use GENERAL File Retention Set-ups - 5 yrs RETAIN 5 yrs, Then DESTROY </div>			
19. Name and Title of Preparer		20. Telephone Number		21. Date	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)

DEPARTMENT OF GENERAL SERVICES
RECORDS MANAGEMENT DIVISION
7275 WATERLOO ROAD
P.O. BOX 275
JESSUP, MARYLAND 20794

AGENCY RECORDS INVENTORY

PAGE ____ OF ____

1. Department/Agency

Treas.

2. Division

3. Unit

DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.

4. Record Series Title

Transfers & Address Changes

5. Earliest Year/Latest Year

93 to 95 1-10 distn
92-93 8-10

6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)

Transfers - Change in property ownership

Address changes - Bill stubs, letters, assmt + notices, P - change in the mailing address or the premise address

7. Record Series Format(s)

- ☒ Letter Size *Transfers* ☐ Microfilm
☐ Legal Size ☐ Computer Tape
☐ Bound Book ☐ Floppy Disk
☐ Audio Tape ☐ Video Tape

☒ Other (specify)
different orgs (Address Changes)

8. Record Series Sequence

- ☐ Alphabetical
☒ Numerical *Trans.*
☒ Chronological *Dist*
☐ Geographical
☐ Other (specify)

9. Volume

☐ File Drawer(s)
☐ Microfilm Reel(s)
☐ Computer Tape(s)
☒ Other (specify)
4 boxes
Number

10. Annual Accumulation

☐ File Drawer(s)
☐ Microfilm Reel(s)
☐ Computer Tape(s)
☒ Other (specify)
1 1/2 boxes
Number

11. File is Used

☐ Daily ☐ Weekly ☐ Monthly

When needed

12. File Becomes Inactive After

Number ☐ Month(s) ☐ Year(s)

13. Current Location(s) (Bldg., Floor, Room)

T.O.

14. Is Record Series Duplicated Elsewhere?

(If yes, specify agency or office).
☐ Yes ☒ No

Accession 500

15. Access Restrictions ☐ Yes ☒ No
(If Yes, cite Law(s) & Regulation(s))

16. Audit Requirements

☐ None ☐ State ☐ Federal ☒ Independent

17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)

☐ Yes ☒ No

Address Changes

18. Recommended Retention

*Transfers - Retain
For 5 yrs, then Destroy.
Add - 3 yrs after FY, then
Destroy*

19. Name and Title of Preparer

20. Telephone Number

21. Date

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <i>Meas.</i>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <i>Lien Information</i>				5. Earliest Year/Latest Year _____ to _____	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <i>- Liens filed on Corporations, Businesses, Public Utilities - copies of notices sent to property owners, liens filed, returned mail and correspondence</i> <i>- Lien Releases - release of lien forms, copies then filed, notices sent to property owner, check request to release lien, copy from court that lien was released in this or another jurisdiction</i>					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) Number <i>Box</i>	
11. File is Used <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <i>and Kildorin</i>		12. File Becomes Inactive After _____ / _____ Number <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)			
13. Current Location(s) (Bldg., Floor, Room) <i>Storage Room</i>		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Lien Releases - Court House</i>			
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))		16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent			
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		18. Recommended Retention <i>Retain for 2 yrs. after liens are released and audit requirements have been fulfilled then destroy</i>			
19. Name and Title of Preparer		20. Telephone Number		21. Date <i>7</i>	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <div style="font-size: 1.5em; font-family: cursive;">Treas.</div>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <div style="font-size: 1.2em; font-family: cursive;">Leon Releases 8/3/84 - 9/4/95</div>				5. Earliest Year/Latest Year <div style="font-size: 1.2em; font-family: cursive;">8/3 to 9/5</div>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <div style="font-size: 1.5em; font-family: cursive;">Old judgment records</div>					
7. Record Series Format(s) <input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <div style="text-align: center; font-size: 1.5em;">1</div> <div style="text-align: center;">Number</div> <div style="font-size: 1.2em; font-family: cursive; text-align: center;">box storage</div> <div style="text-align: right;"> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____ </div>	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <div style="font-size: 1.5em; font-family: cursive; text-align: center;">none</div>		12. File Becomes Inactive After <div style="text-align: center; font-size: 1.5em;">Number</div> <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)			
13. Current Location(s) (Bldg., Floor, Room) <div style="font-size: 1.5em; font-family: cursive;">70 storeroom</div>		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <div style="font-size: 1.2em; font-family: cursive; text-align: right;">Clerk of Circuit Court</div>			
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))		16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent			
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		18. Recommended Retention <div style="font-size: 1.5em; font-family: cursive; text-align: center;"> RETAIN FOR 3 yrs after FY, Then DESTROY. </div>			
19. Name and Title of Preparer <div style="font-size: 1.5em; font-family: cursive;">Hocking</div>		20. Telephone Number		21. Date	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
<p>1. Department/Agency <i>Treas.</i></p>		<p>2. Division</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title <i>Treas. Eiled, corp, DPP - Public Util.</i></p>				<p>5. Earliest Year/Latest Year <i>1980 to 1997</i></p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <i>Form Notice of Personal Property, Corporation tax been filed pursuant to chapter 878 of the laws of Maryland 1976. This file contain a copy of pursuant letter, been filed any return mail or correspondence.</i></p>					
<p>7. Record Series Format(s)</p> <p><input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input checked="" type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p><i>2</i> Number</p> <p><input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____</p>	
<p>11. File is Used</p> <p><input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly</p>		<p>12. File Becomes Inactive After</p> <p>Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)</p> <p style="text-align: center;"><i>NEVER</i></p>			
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p><i>Treas. off. - file cabinets in back</i></p>		<p>14. Is Record Series Duplicated Elsewhere? <i>GOVERNMENT</i></p> <p>(If yes, specify agency or office)</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p style="text-align: center;"><i>Clerk of Circuit Court</i></p>			
<p>15. Access Restrictions</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(If Yes, cite Law(s) & Regulation(s))</p>		<p>16. Audit Requirements</p> <p><input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent</p>			
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>18. Recommended Retention <i>RETAIN FOR 3 YRS</i></p> <p><i>After conditions are released AND Audit Requirements have been fulfilled, then Destroy.</i></p>			
<p>19. Name and Title of Preparer</p>		<p>20. Telephone Number</p>		<p>21. Date</p>	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
<p>1. Department/Agency <i>Treas.</i></p>		<p>2. Division</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title <i>Treas. Release</i></p>				<p>5. Earliest Year/Latest Year <i>1985 to 1997</i></p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)</p> <p><i>Liens - This file contains release of lien forms, copy of lien filed final. Pursuant letter, check request, copy from clerk office that release was released, copy of cashiers receipt from clerks office.</i></p>					
<p>7. Record Series Format(s)</p> <p><input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input checked="" type="checkbox"/> Chronological - <i>date of release</i></p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p style="text-align: center;"><u>1</u> Number</p> <p><input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____</p>	
<p>11. File is Used</p> <p><input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly</p>		<p>12. File Becomes Inactive After</p> <p style="text-align: center;"><u>1</u> Number</p> <p><input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)</p>			
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p><i>Treas. - cabinets in back</i></p>		<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>Clerk of Circuit Court</i></p>			
<p>15. Access Restrictions</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(If Yes, cite Law(s) & Regulation(s))</p>		<p>16. Audit Requirements</p> <p><input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent</p>			
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>18. Recommended Retention</p> <p><i>RETAIN FOR</i></p> <p><i>3 yrs after FY liens are released and audit requirements have been</i></p>			
<p>19. Name and Title of Preparer</p>		<p>20. Telephone Number</p>		<p>21. Date</p> <p><i>Fulfilled</i></p> <p><i>Then Destroy.</i></p>	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
<p>1. Department/Agency <i>4 Meas.</i></p>		<p>2. Division</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title <i>mass Payment / Billing</i></p>				<p>5. Earliest Year / Latest Year <i>43 to 96</i> <i>94-96 Print Outs</i></p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <i>Queries, memos, correspondence, Lotus spreadsheets, layouts, instructions</i> <i>List of accounts, manual billings, Computer Printouts</i> <i>Print outs and files are of mortgage Companies and servicers to relay</i> <i>information pertaining to Billing and payments, 50 or more</i> <i>tax accounts would be processed for billing and payments by</i> <i>tape.</i></p>					
<p>7. Record Series Format(s)</p> <p><input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input checked="" type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p><i>2</i> Number</p> <p><input type="checkbox"/> File Drawer(s)</p> <p><input type="checkbox"/> Microfilm Reel(s)</p> <p><input type="checkbox"/> Computer Tape(s)</p> <p><input checked="" type="checkbox"/> Other (specify) <i>tubs</i></p>	
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly</p> <p><i>yearly</i></p>		<p>12. File Becomes Inactive After</p> <p>_____ Number</p> <p><input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)</p>			
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p><i>T.O. Hutch</i></p>		<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			
<p>15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))</p>		<p>16. Audit Requirements</p> <p><input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent</p>			
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>18. Recommended Retention</p> <p><i>over</i></p> <p><i>3 yrs (5) after FY - Pmts</i></p> <p><i>1 yr " " - Info.</i></p>			
<p>19. Name and Title of Preparer</p>		<p>20. Telephone Number</p>		<p>21. Date</p>	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <div style="text-align: center; font-size: 1.5em;">Treas.</div>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <div style="text-align: center; font-size: 1.2em;">Special Assn't.</div>				5. Earliest Year/Latest Year <div style="text-align: center;">75 to 96</div>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <div style="font-family: cursive;"> Check request, Transmittal form, Copy of check, print out of Lotus Spreadsheet, Correspondence, Copy of transfer, Receipts from certified letters, tax bills, Accumulative, Lienaction listing, Amortization Assessment Rolls, Journal entry, Journal input edit listing, print screens Notice of Lien, memo, Assessment information, ordinance, owners of record Plots, agreements, release of Lien, receipts. The purpose of these files is to show documentation for the Special Assessments </div>					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <div style="text-align: center; font-size: 1.2em;">1/3</div> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly		10. Annual Accumulation <div style="text-align: center; font-size: 1.2em;">10</div> Number <div style="text-align: center; font-family: cursive;">files</div> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____			
13. Current Location(s) (Bldg., Floor, Room) <div style="text-align: center; font-size: 1.5em;">T.O.</div>			12. File Becomes Inactive After <div style="text-align: center;">Number</div> <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)		
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))			14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <div style="font-family: cursive;">Lien's filed in Courthouse</div>		
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent		
19. Name and Title of Preparer			20. Telephone Number		21. Date
18. Recommended Retention <div style="font-family: cursive; font-size: 1.2em;"> RETAIN FOR 5 yrs after FY address is paid - Then Destroy. </div>					

Retain for 5 yrs After Loan is
Released AND UNTIL

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
<p>1. Department/Agency <i>Meas.</i></p>		<p>2. Division</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title <i>Assessable base accounts receivable, tax refund reports, real estate bought at tax sale, unpaid tax being</i></p>				<p>5. Earliest Year/Latest Year <i>1992 to 1996</i></p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <i>Assessable base Report on assessments properly adjusted accounts receivable - reports on all property tax billed, collected or adjusted. Reports on tax refunds - field refund edit list, released refund edit list, refund check register, update refunds. Report on all tax sale property purchased by DC Gov. Record tax listing of all outstanding taxes as of June 30.</i> </p>					
<p>7. Record Series Format(s)</p> <p><input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p style="text-align: right;"> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____ </p> <p>Number <i>3 boxes</i></p>	
<p>10. Annual Accumulation</p> <p style="text-align: right;"> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____ </p> <p>Number _____</p>					
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly</p>			<p>12. File Becomes Inactive After</p> <p>Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)</p>		
<p>13. Current Location(s) (Bldg., Floor, Room) <i>T.O. Storeroom</i></p>			<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		
<p>15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))</p>			<p>16. Audit Requirements</p> <p><input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent</p>		
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			<p>18. Recommended Retention <i>RETAIN FOR</i> <i>2 yrs after FY and Audi.</i> <i>Requirements have been</i> <i>2/15/97 Fed Filed, Then Destroy</i></p>		
<p>19. Name and Title of Preparer</p>		<p>20. Telephone Number</p>		<p>21. Date</p>	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
<p>1. Department/Agency <i>Meas.</i></p>		<p>2. Division</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title <i>Assessable Base</i></p>				<p>5. Earliest Year/Latest Year <i>1982 to 1992</i></p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)</p> <p><i>spread sheets filed by levy year on the original permit bill for each levy year containing amt. corrections to the tax roll for the fiscal year such as abatement addition, certification, the assessable base report is used to balance out year end the amt. billed with the state treasurer's office for year end audit.</i></p>					
<p>7. Record Series Format(s)</p> <p><input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p> <p><i>Computer printouts</i></p>		<p>8. Record Series Sequence</p> <p><input type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p><input type="checkbox"/> File Drawer(s)</p> <p><input type="checkbox"/> Microfilm Reel(s)</p> <p><input type="checkbox"/> Computer Tape(s)</p> <p><input type="checkbox"/> Other (specify) _____</p> <p>Number <i>1 box</i></p>	
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly</p>		<p>12. File Becomes Inactive After</p> <p>Number _____ <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)</p> <p><i>Year end audit</i></p>			
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p><i>T.O. storeroom</i></p>		<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			
<p>15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(If Yes, cite Law(s) & Regulation(s))</p>		<p>16. Audit Requirements</p> <p><input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent</p>			
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>18. Recommended Retention <i>RETAIN FOR</i></p> <p><i>2 yrs after FY and Audit Requirements have been fulfilled, then destroy</i></p>			
<p>19. Name and Title of Preparer</p>		<p>20. Telephone Number</p>		<p>21. Date</p>	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <i>Treasurer's</i>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <i>unpaid Taxes of 6-30-84</i>				5. Earliest Year/Latest Year <i>6-30-84</i>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <div style="text-align: center; font-size: large; margin-top: 20px;"> <i>Computer printout</i> </div>					
7. Record Series Format(s) <input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input checked="" type="checkbox"/> Sound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input checked="" type="checkbox"/> Alphabetical <input checked="" type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (specify) <div style="text-align: center; font-size: large; margin-top: 10px;"> <i>1</i> <i>Binder</i> </div>	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <div style="text-align: center; font-size: large; margin-top: 10px;"> <i>none</i> </div>		12. File Becomes Inactive After <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s) Number _____			
13. Current Location(s) (Bldg., Floor, Room) <div style="text-align: center; font-size: large; margin-top: 10px;"> <i>Storage Building</i> </div>		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))		16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent			
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		18. Recommended Retention <div style="text-align: center; font-size: large; margin-top: 10px;"> <i>RETAIN FOR</i> <i>2 yrs after FY, Then</i> <i>DESTROY.</i> </div>			
19. Name and Title of Preparer		20. Telephone Number		21. Date	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <div style="font-size: 1.5em; margin-left: 100px;">Treas</div>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <div style="font-size: 1.2em; margin-left: 50px;">Returned mail</div>				5. Earliest Year/Latest Year <div style="font-size: 1.2em; margin-left: 50px;">7/96 to 2/97</div>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <div style="font-size: 1.2em; margin-top: 20px;">Tax bills & notices returned as undeliverable</div>					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input checked="" type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <div style="text-align: center; font-size: 1.5em; margin-top: 10px;">3</div> <div style="text-align: center; margin-top: 5px;">Number</div> <div style="font-size: 1.2em; margin-top: 10px;">plastic bins</div> <div style="float: right; font-size: 0.8em;"> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) </div>	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly		12. File Becomes Inactive After <div style="text-align: center; margin-top: 5px;">Number</div> <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)			
13. Current Location(s) (Bldg., Floor, Room) <div style="font-size: 1.2em; margin-top: 10px;">T.O. window shelf</div>		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))		16. Audit Requirements <input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent			
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		18. Recommended Retention <div style="font-size: 1.2em; margin-top: 20px;">Retain for 3 yrs; then destroy.</div>			
19. Name and Title of Preparer <div style="font-size: 1.2em; margin-top: 10px;">Hocking</div>		20. Telephone Number		21. Date	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ CF ____	
1. Department/Agency <i>TALCO</i>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <i>Tax Sale Files</i>				5. Earliest Year/Latest Year _____ to _____	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <i>Purchaser's Tax Sale Files - ck requests, old tax receipts, court orders, court petitions, letters of satisfaction</i> <i>Tax Sale Auction - Unpaid tax listing, newspaper ad, incorporation list, bid list, faxed delinquents</i> <i>Tax Sale Redemptions</i> <i>Tax Sale Foreclosures</i> <i>Tax Sale BOOKS</i>					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input checked="" type="checkbox"/> Alphabetical <input checked="" type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) Number <i>boxes</i>	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <i>when needed</i>		12. File Becomes Inactive After Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)			
13. Current Location(s) (Bldg., Floor, Room) <i>Storage</i>		14. Is Record Series Duplicated Elsewhere? <i>Foreclosures - Court records</i> (If yes, specify agency or office) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))		16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent			
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		18. Recommended Retention <i>Action & Redemptions, delinquents - 5 yrs and until all audit log, have been fulfilled, then destroy</i> <i>Tax Sale books & Foreclosures - retain for 25 yrs</i>			
19. Name and Title of Preparer		20. Telephone Number		21. Date	

* until all auditing has been met. (see below)

— Purchaser's Tax Sale Files — pending open files
Retain until property is sold or
foreclosed, then transfer to appropriate
file

KEVIN?

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY	
1. Department/Agency <i>Freds.</i>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <i>Car Sale & Property Book</i>				5. Earliest Year/Latest Year <i>1914 to 1996</i>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series) <i>Bound books used to record every property sold at tax sale with complete documentation of each taxpayers account balance.</i> <i>Is this filed with courts? No</i>					
7. Record Series Format(s) <input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input checked="" type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input checked="" type="checkbox"/> Alphabetical <input checked="" type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <i>4</i> Number <i>Books</i> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____	
11. File is Used <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <i>Current books</i>		12. File Becomes Inactive After Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)			
13. Current Location(s) (Bldg., Floor, Room) <i>T.O. - vault</i>		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
15. Access Restrictions (If Yes, cite Law(s) & Regulation(s)) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent			
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		18. Recommended Retention <i>Permanent, Transfer Periodically to the Md. State Archives</i>			
19. Name and Title of Preparer		20. Telephone Number		21. Date <i>ARCHIVES</i>	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
1. Department/Agency		2. Division		3. Unit	
Treasurers					
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
4. Record Series Title				5. Earliest Year/Latest Year	
Property Redeemed, Tax Sale Advertisements				79 to 81 - Property Re 102 - Advertisements	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)					
Check Request, Tax Bills Advertisements					
7. Record Series Format(s)		8. Record Series Sequence		9. Volume	
<input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		<input checked="" type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		<input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (specify) <u>Boxes</u> Number <u>3</u>	
				10. Annual Accumulation	
				<input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____ Number _____	
11. File is Used			12. File Becomes Inactive After		
<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly			Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)		
13. Current Location(s) (Bldg., Floor, Room)			14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)		
Storage Building			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
15. Access Restrictions (If Yes, cite Law(s) & Regulation(s))			16. Audit Requirements		
<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent		
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)			18. Recommended Retention		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Retain for 5 yrs after redemption, Then Destroy.		
19. Name and Title of Preparer		20. Telephone Number		21. Date	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)

DEPARTMENT OF GENERAL SERVICES
RECORDS MANAGEMENT DIVISION
7275 WATERLOO ROAD
P.O. BOX 275
JESSUP, MARYLAND 20794

AGENCY RECORDS INVENTORY

PAGE ____ OF ____

1. Department/Agency

Treas.

2. Division

3. Unit

DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes

4. Record Series Title

Tax Sale Dead Files

? see Kay's

5. Earliest Year/Latest Year

83 to 94

6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series)

check request, pd tax rpts, T/S Cert / correspondor or letter to purchase
Court petitions / letter of satis

Purpose - To ensure property taxes have been redeemed & paid

7. Record Series Format(s)

- ☒ Letter Size ☐ Microfilm
☐ Legal Size ☐ Computer Tape
☐ Bound Book ☐ Floppy Disk
☐ Audio Tape ☐ Video Tape
☐ Other (specify) _____

8. Record Series Sequence

- ☐ Alphabetical
☒ District &
☒ Numerical
☐ Chronological
☐ Geographical
☐ Other (specify) _____

9. Volume

- ☒ File Drawer(s)
☐ Microfilm Reel
☐ Computer Tape
☐ Other (specify)
Bk 3
Number
Drawer 2 & 3

10. Annual Accumulation

- ☒ File Drawer(s)
☐ Microfilm Reel
☐ Computer Tape
☐ Other (specify)
2
Number

11. File is Used

- ☐ Daily ☐ Weekly ☐ Monthly

When Needed

12. File Becomes Inactive After

- Number ☐ Month(s) ☐ Year(s)

13. Current Location(s)

(Bldg., Floor, Room)

T.O.

14. Is Record Series Duplicated Elsewhere?

- (If yes, specify agency or office)
☐ Yes ☒ No

15. Access Restrictions

(If Yes, cite Law(s) & Regulation(s))

- ☐ Yes ☒ No

16. Audit Requirements

- ☐ None ☐ State ☐ Federal ☒ Independent

17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)

- ☐ Yes ☒ No

18. Recommended Retention

RETAIN FOR
5yr. after FY redeemed
Then destroy

19. Name and Title of Preparer

20. Telephone Number

21. Date

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)

DEPARTMENT OF GENERAL SERVICES
RECORDS MANAGEMENT DIVISION
7275 WATERLOO ROAD
P.O. BOX 275
JESSUP, MARYLAND 20794

AGENCY RECORDS INVENTORY

PAGE ____ OF ____

1. Department/Agency

Treas.

2. Division

3. Unit

DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes

4. Record Series Title

Tax Sale Purchase Cert. Folders

5. Earliest Year/Latest Year

95 to 96

6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series)

3rd Drawer Purchases' Tax Sale Files, ck request, pd tax repts, correspondence etc
4th Drawer Tax Sale Auction - unpaid tax listing, newspaper ad, incorporated towns, li
5th Drawer " " " Bid listing, faxed deletions 95-96 yrs
1989 - 94 yrs

7. Record Series Format(s)

- ☒ Letter Size ☐ Microfilm
☐ Legal Size ☐ Computer Tape
☐ Sound Book ☐ Floppy Disk
☐ Audio Tape ☐ Video Tape
☐ Other (specify) _____

8. Record Series Sequence

- ☒ Alphabetical 3rd Drawer
☐ Numerical
☒ Chronological 4 & 5
☐ Geographical
☒ Other (specify) _____

9. Volume

Back 1

Drawn 344
Number

- ☒ File Drawer(s)
☐ Microfilm Reel
☐ Computer Tape
☐ Other (specify) _____

10. Annual Accumulation

3
Number

- ☒ File Drawer(s)
☐ Microfilm Reel
☐ Computer Tape
☐ Other (specify) _____

11. File is Used

- ☐ Daily ☐ Weekly ☐ Monthly

When Needed

12. File Becomes Inactive After

- Number ☐ Month(s) ☐ Year(s)

13. Current Location(s) (Bldg., Floor, Room)

T.O.

14. Is Record Series Duplicated Elsewhere?

- (If yes, specify agency or office)
☐ Yes ☒ No

15. Access Restrictions

(If Yes, cite Law(s) & Regulation(s))

- ☐ Yes ☒ No

16. Audit Requirements

- ☐ None ☐ State ☐ Federal

☒ Independent

17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)

- ☐ Yes ☒ No

18. Recommended Retention

Auction Info - 5 yrs

Purch files - open ?
OVER

19. Name and Title of Preparer

20. Telephone Number

21. Date

Pending
open files

1. Purchase Tax Sale Files - Retain until Property is Redeemed or Foreclosed then Transfer to Appropriate File.
2. Auction Files - Retain for 5 yrs and until all Audit Requirements have been fulfilled, then Destroy.

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
<p>1. Department/Agency <i>Treas.</i></p>		<p>2. Division</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title <i>Tax Sale dead files</i></p>				<p>5. Earliest Year/Latest Year <i>1982 to 1992</i></p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <i>Some correspondence this file contains folders of each property sold at tax sale. The folders contain a copy of the final tax bill, tax sale certificate, any court order of foreclosure, copy of check request for redemption and other related correspondence.</i></p>					
<p>7. Record Series Format(s)</p> <p><input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input checked="" type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p><i>2</i> Number <i>DOX</i></p> <p><input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____</p>	
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly</p>		<p>12. File Becomes Inactive After</p> <p>Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)</p>			
<p>13. Current Location(s) (Bldg., Floor, Room)</p>		<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			
<p>15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))</p>		<p>16. Audit Requirements</p> <p><input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent</p>			
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>18. Recommended Retention</p> <p><i>1. Redeemed 5 yrs</i> <i>2. Foreclose - permanent over yes</i></p>			
<p>19. Name and Title of Preparer</p>		<p>20. Telephone Number</p>		<p>21. Date</p>	

1. Redeemed — Retain for 5 yrs. and until
All Audits have been fulfilled, then
Destroy.

2. (see BALTO. Co. Schedule ~~CT~~ CT/D
Pg 3 of 16

Foreclosure — Permanent,

Transfer periodically to the
Md. State Archives

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
1. Department/Agency <i>Threat.</i>		2. Division		3. Unit	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
4. Record Series Title <i>Homeowner Tax Credit Ziles + Receipts</i>				5. Earliest Year/Latest Year ____ to ____	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)</p> <p><i>Homeowner tax credit certificates Listing of homeowners w/ certificates paying semiannually Receipted Homeowners Tax credit information and Tax credit receipts return forms - check requests for state</i></p>					
7. Record Series Format(s)		8. Record Series Sequence		9. Volume	
<input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		<input type="checkbox"/> Alphabetical <input checked="" type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		<input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) Number <i>files</i>	
				10. Annual Accumulation	
				<input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) Number _____	
11. File is Used			12. File Becomes Inactive After		
<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly			Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)		
13. Current Location(s) (Bldg., Floor, Room) <i>T.O.</i>			14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>State Dept of Accounts + Tax</i>		
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))			16. Audit Requirements <input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent		
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			18. Recommended Retention <i>Blain for 2 years after FY, then destroy</i>		
19. Name and Title of Preparer <i>Blocker</i>		20. Telephone Number		21. Date	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <div style="text-align: center; font-size: 1.2em;">Treas.</div>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <div style="font-size: 1.1em;">RECAPTURED HOME OWNERS TAX CREDITS</div>				5. Earliest Year/Latest Year <div style="font-size: 1.1em;">1997 to 1996</div>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <div style="font-size: 1.1em;">FORMS TO REPORT DOLLAR AMT. OF HOMEOWNERS TAX CREDITS WHICH ARE RECAPTURED BY COUNTY DUE TO TRANSFER OF SUBJECT PROPERTY - Also homeowners' tax credit receipt release</div>					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input checked="" type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <div style="text-align: center;">/</div> Number <div style="float: right;"> <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) </div>	
11. File is Used <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly		10. Annual Accumulation <div style="text-align: center;">/</div> Number <div style="float: right;"> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) </div> <div style="text-align: right; font-size: 1.1em;">file folder</div>			
12. File Becomes Inactive After <div style="text-align: center;">_____</div> Number <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)		13. Current Location(s) (Bldg., Floor, Room) <div style="font-size: 1.1em;">T.O. - file cabinet in back</div>			
14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <div style="font-size: 1.1em;">State Department of Ass't & Capital</div>		15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))			
16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent		17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
18. Recommended Retention <div style="font-size: 1.2em;">RETAIN FOR 2 yrs, after FY, Then DESTROY.</div>		19. Name and Title of Preparer <div style="font-size: 1.1em;">Herkley</div>			
20. Telephone Number		21. Date			

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
<p>1. Department/Agency</p> <p><i>Treas.</i></p>		<p>2. Division</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title <i>State Tax Receivable Monthly Reports (STARS)</i></p>				<p>5. Earliest Year/Latest Year ____ to ____</p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)</p> <p><i>STARS report - copies of reports which include: Homeowner's Tax Credits, Agricultural transfers (farm & wooded), copies of E-17s (request for state tax refund), copies of additions/deductions & assessable dec. Including check request, copy of check, state G/L transaction reports, tax receivable summaries, Report of Collectors of State Tax</i></p>					
<p>7. Record Series Format(s)</p> <p><input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input checked="" type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p><input type="checkbox"/> File Drawer(s)</p> <p><input type="checkbox"/> Microfilm Reel(s)</p> <p><input type="checkbox"/> Computer Tape(s)</p> <p><input type="checkbox"/> Other (specify) _____</p> <p>Number <i>files / boxes</i></p>	
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly</p>		<p>12. File Becomes Inactive After</p> <p>Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)</p>			
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p><i>T.O.</i></p>		<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>state treasurer's office</i></p>			
<p>15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(If Yes, cite Law(s) & Regulation(s))</p>		<p>16. Audit Requirements</p> <p><input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent</p>			
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>18. Recommended Retention</p> <p><i>Retain for 5 yrs after FIC or until a final disposition requirements are met, 4-26 last reg.</i></p>			
<p>19. Name and Title of Preparer</p>		<p>20. Telephone Number</p>		<p>21. Date</p>	

STATE REPORT OF COLLECTIONS/TAXES RECEIVABLE REPORT

DESCRIPTION

15. This is a file of duplicate copies of state forms (*) which include monthly general ledger files, check requests, copies of the remittance check and accompanying work papers. The original is submitted monthly to the Comptroller of the Treasury. The report details monthly collections of state taxes transmitted & details taxes receivable.

(*)Stars Report. #Cot/Gad 170

CB Credit Report. #HTC-103

Agric. Farm & Wooded

Claim for Refund of Real & Personal Property Tax Report. #E-17 or OC-020

Additions/Abatements Report. #030, 031, 033, E12

RETENTION

Retain for five (5) years after the end of the fiscal year it represents, or until all audit requirements have been fulfilled, then destroy.

ITEM NO.	DESCRIPTION	RETENTION
	Folders of all property sold are retained and filed together.	destroy. Retain sale folders (deeded properties) permanently. Retain all tax sale folders prior to 1944 permanently.
13.	<u>ASSESSMENT CHANGES NOTICE</u> The original of the notice is sent from the Appeal Tax Court of Assessments Office which directs the Collector's office to increase or decrease an assessment for the current or prior years. This is the official authorization to make retroactive corrections on the tax rolls.	Retain for five (5) years after the change is made or until all audit requirements have been fulfilled, then destroy.
14.	<u>TAX INSTALLMENT ACCOUNTS</u> The County permits the installment payment of taxes in advance of the tax due date. A card and duplicate are made for each installment account; the original is the Collector's ledger card; the copy is the taxpayer receipt. When the account is paid, the two copies are stapled together with the notice of payment. The cards are itemized accounts payable which support the totals reported on financial statements and carried in control ledgers.	Retain for three (3) years after the end of the fiscal year in which the tax was paid or until all audit requirements have been fulfilled, then destroy.
15.	<u>STATE REPORT OF COLLECTIONS/TAXES RECEIVABLE REPORT</u> This is a file of duplicate copies of State Forms GAO-23, the original of which is submitted monthly to the Comptroller of the Treasury. The report details collections of State Taxes transmitted and details taxes receivable. A copy of the State warrant is returned to the County as acknowledgement of the transmittal. The State Taxes Receivable Report is a monthly report which summarizes collections and receivables; it is prepared in pencil, and a copy is forwarded to the Office of Finance. Both groups are fastened by years. The file also contains work papers.	Retain for five (5) years after the end of the fiscal year it represents, or until all audit requirements have been fulfilled, then destroy. <i>* J2: ... rpt # 067/300 170. J2 rpt # HTC - 103, Appl. Form # 100 used on Work for Long claim for Refund of Prop. 13 P.F. to rpt. # E-17 or OC-020, in front of / Abatement rpt. # 030/031/033/E12 See Comm. Additions / Abatement rpt. # OC-020 / E12</i>

(REV. 1/86)

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p> <p>PAGE ____ OF ____</p>	
<p>1. Department/Agency</p> <p style="text-align: center; font-size: 1.5em;"><i>Treas.</i></p>		<p>2. Division</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title</p> <p><i>CB credits / Additions / Abatements / Certification / Agric. Tax</i></p>				<p>5. Earliest Year/Latest Year</p> <p><i>See #6</i></p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)</p> <p><i>Tax Credit Cert. - Homeowner credit - P - Reduction on prop. taxes 85-94</i></p> <p><i>Assmt change rpt. for additions & abatements. P - Increases or decreases assmts 85-92</i></p> <p><i>Certification for BPP/Cap P - Increases or decreases assmt 81-93</i></p> <p><i>Agric. Transfer Tax - ck. request, copy of check, mthly rpt of collections, G/L Trans. rpt, Trans. tax cap sheet, trans. tax stmt. P - Credit for land used as agric. whether for farm or wooded 93-94</i></p>					
<p>7. Record Series Format(s)</p> <p><input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input checked="" type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p><i>1 box</i></p> <p>Number</p> <p><input type="checkbox"/> File Drawer(s)</p> <p><input type="checkbox"/> Microfilm Reel(s)</p> <p><input type="checkbox"/> Computer Tape(s)</p> <p><input checked="" type="checkbox"/> Other (specify) _____</p>	
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly</p> <p style="text-align: center; font-size: 1.2em;"><i>When Needed</i></p>		<p>12. File Becomes Inactive After</p> <p>Number <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)</p>			
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p style="text-align: center; font-size: 1.5em;"><i>T.O.</i></p>		<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p style="text-align: center; font-size: 1.2em;"><i>Assessors' 85</i></p>			
<p>15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(If Yes, cite Law(s) & Regulation(s))</p>		<p>16. Audit Requirements</p> <p><input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent</p>			
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>18. Recommended Retention</p> <p style="text-align: center; font-size: 1.5em;"><i>5 yrs after chg</i></p> <p style="text-align: center; font-size: 1.2em;"><i>RETAIN FOR 5 YRS AFTER FYM Charge, Then Destroy.</i></p>			
<p>19. Name and Title of Preparer</p>		<p>20. Telephone Number</p>		<p>21. Date</p>	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
<p>1. Department/Agency</p> <p style="text-align: center; font-size: 1.2em;"><i>Treas.</i></p>		<p>2. Division</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title</p> <p style="font-size: 1.2em;"><i>Agric Transfer Tax</i></p>				<p>5. Earliest Year/Latest Year</p> <p>W <u>86</u> to <u>90</u> F <u>85</u> <u>95</u></p>	
<p>6. Record Series Description (Briefly describe the types of informationn/documents/forms found in the series. Include the purpose or function of the series.)</p> <p><i>Agric Farm - ch request, mchly rpt. of collections, G/L Trans. rpt, transfer tax cap sheet, transfer tax stmt. P- Credit for land used as agric. whether for farm or wooded.</i> <i>Agric Wooded - same as above</i></p>					
<p>7. Record Series Format(s)</p> <p><input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input checked="" type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p><u>1 box</u></p> <p>Number</p> <p><input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (specify)</p>	
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly</p> <p style="text-align: center; font-size: 1.2em;"><i>When Need</i></p>		<p>12. File Becomes Inactive After</p> <p>Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)</p>			
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p style="text-align: center; font-size: 1.2em;"><i>T.O.</i></p>		<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p style="text-align: center; font-size: 1.2em;"><i>Assessor's office</i></p>			
<p>15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(If Yes, cite Law(s) & Regulation(s))</p>		<p>16. Audit Requirements</p> <p><input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent</p>			
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>18. Recommended Retention</p> <p style="text-align: center; font-size: 1.5em;"><i>RETAIN FOR 5 yr after FY, THEN DESTROY.</i></p>			
<p>19. Name and Title of Preparer</p>		<p>20. Telephone Number</p>		<p>21. Date</p>	

<p><i>Instructions</i> - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
<p>1. Department/Agency <i>Treas.</i></p>		<p>2. Division</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title <i>State Stars Rpt. & Agric Tax</i></p>				<p>5. Earliest Year/Latest Year <i>Stars 85 to 89</i> <i>Agric 81 82</i></p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <i>Stars rpt, copies of rpts which include: homeowner tax credits, Agric trans tax form & wooded, copies of EIT's, copies of additions / deductions to the assessable base of taxable prop.</i> <i>P Copies of Back up rpts sent to the state detailing collections, refunds etc.</i> <i>Agricultural Transfer Tax - check request, mthly rpt. of collections, G/L transaction rpt, transfer tax cap sheet trans. tax stmt. P Credit for land used as agric. whether for farm or wooded.</i> </p>					
<p>7. Record Series Format(s)</p> <p><input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input checked="" type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p><i>1 box</i> Number</p> <p><input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (specify)</p>	
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly</p>		<p>12. File Becomes Inactive After</p> <p>Number <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)</p>			
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p><i>T.O.</i></p>		<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Comptroller of the Treasury</i></p>			
<p>15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))</p>		<p>16. Audit Requirements</p> <p><input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent</p>			
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>18. Recommended Retention</p> <p><i>RETAIN for 5 yr after FY, Then DESTROY</i></p>			
<p>19. Name and Title of Preparer</p>		<p>20. Telephone Number</p>		<p>21. Date</p>	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
1. Department/Agency <div style="text-align: center; font-size: 1.5em;">Treas.</div>		2. Division		3. Unit	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
4. Record Series Title <div style="font-size: 1.2em;">State Tax Receivable Monthly Reports (STARS)</div> Credit Card / State Tax / Additions / Deductions / Other				5. Earliest Year/Latest Year ____ to ____ <div style="font-size: 1.2em;">See #6</div>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)</p> <p>Tax Credit Card - Homeowner credit P - Deduction on prop taxes 95-99</p> <p>State rpt - Copies of rpts. which include: Homeowner tax credits, agric trans - Form + Wooded, copies of E-17s, Copies of additions / deductions to the assessable base of taxable prop. P - Copies of back up rpt that are sent to the state detailing collections, refunds etc. 93-97</p> <p>State change rpt for additions, deductions, reconfigurations, P - Deductions on other taxes 93-99</p>					
7. Record Series Format(s)		8. Record Series Sequence		9. Volume	
<input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		<input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		<input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel <input type="checkbox"/> Computer Tape <input type="checkbox"/> Other (specify) _____ <div style="text-align: center;">2 Number</div>	
				<p>10. Annual Accumulation</p> <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel <input type="checkbox"/> Computer Tape <input type="checkbox"/> Other (specify) _____ <div style="text-align: center;">1 Number</div>	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly			12. File Becomes Inactive After <div style="text-align: center;">____ Number</div> <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)		
13. Current Location(s) (Bldg., Floor, Room) <div style="text-align: center; font-size: 1.5em;">T.O.</div>			14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <div style="text-align: center;">Assess - 500</div>		
15. Access Restrictions (If Yes, cite Law(s) & Regulation(s)) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent		
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			18. Recommended Retention <div style="font-size: 1.5em; text-align: center;">RETAIN FOR 5yr after FY, Then DESTROY.</div>		
19. Name and Title of Preparer		20. Telephone Number		21. Date	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <i>Meat</i>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <i>Incorporated Towns Tax Receivable Monthly Reports</i>				5. Earliest Year/Latest Year ____ to ____	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <i>Monthly report of collections including check request, copy of check, municipal pay/adj report, G/L transaction report, Report of Collections</i>					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) Number <i>files</i>	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly		12. File Becomes Inactive After Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)			
13. Current Location(s) (Bldg., Floor, Room) <i>T.O.</i>		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))		16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent			
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		18. Recommended Retention <i>Retain for 5 yrs after FY or until all audit requirements have been met then destroy</i>			
19. Name and Title of Preparer <i>Hockney</i>		20. Telephone Number		21. Date	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <div style="text-align: center; font-size: 2em; font-family: cursive;">Treas.</div>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <div style="font-family: cursive;">Incorporate Town Taxes / State Tax Rpt</div> <div style="font-family: cursive;">HB Credits</div>				5. Earliest Year/Latest Year ____ to ____ <div style="font-family: cursive;">See # 6</div>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <div style="font-family: cursive;">Town Rpt - ck request, copy of check, rpt. of collections, municipal Pay/Adj rpt, G/L trans. rpt. 96</div> <div style="font-family: cursive;">Collection of town taxes</div> <div style="font-family: cursive;">State Tax Rpt - ck request, copy of check, G/L trans rpt, tax receivable summary 93-94+95-97</div> <div style="font-family: cursive;">Homes had credit & credit based on their assmt 96-97</div>					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <div style="text-align: center; font-size: 1.5em;">2</div> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____	
10. Annual Accumulation <div style="text-align: center; font-size: 1.5em;">1</div> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____					
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly			12. File Becomes Inactive After Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)		
13. Current Location(s) (Bldg., Floor, Room) <div style="font-family: cursive; font-size: 1.5em;">T.O.</div>			14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))			16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent		
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			18. Recommended Retention <div style="font-family: cursive; font-size: 1.5em;">RETAIN FOR 5 YRS, THEN DESTROY.</div> <div style="font-family: cursive; font-size: 1.5em;">AND AUDITS HAVE BEEN FULFILLED →</div>		
19. Name and Title of Preparer		20. Telephone Number		21. Date	

Instructions -- Type or print a separate form for each new or revised record series.		AGENCY RECORDS INVENTORY Page _____ of _____	
1. Department/Agency Treasurer's Office	2. Division	3. Unit/Program	
DEFINITION: Record Series: a group of related records normally filed and used as a unit for reference as well as retention & disposition purposes.			
4. Record Series Title Held Tax refunds and Paid property Tax Refunds		5. Earliest Year / Latest Year _____ to _____	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) Held Tax refunds-pending property tax refunds including correspondence and backup documentation. Paid property tax refunds on coporation taxes, personal property taxes, real property taxes and public utility taxes. The file may contain the name of payee, address, amount of refund, check number, reason for the refund an any correspondence or back up documentation for the refunds.			
7. Record Series Format(s) <input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____	
9. Volume <div style="text-align: right;">Number</div> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____		10. Annual Accumulation <div style="text-align: right;">Number</div> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____	
11. File is used: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly		12. File becomes inactive after _____ Month(s) _____ Year(s)	
13. Current Location(s) (Building, Floor, Room) xx xx xx		14. Is record series duplicated elsewhere? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, specify agency or office) x x	
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, cite law(s) and regulation(s)) x x		16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent <div style="text-align: right;">County</div>	
17. Is an index system used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, explain briefly and describe any hardware/software) x x		18. Recommended retention Retain for five (5) years after FY of refund and until all audit requirements have been fulfilled, then destroy.	
19. Name and Title of Preparer Adair M. Hocking <i>Title: Deputy Treasurer</i>	20. Telephone Number 301-645-0712	21. Date 2/9/98	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p> <p>PAGE ____ OF ____</p>	
<p>1. Department/Agency</p> <p style="font-size: 1.5em; margin-left: 100px;"><i>Meas.</i></p>		<p>2. Division</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title</p> <p style="font-size: 1.2em; margin-left: 20px;"><i>Paid Property Tax Refunds</i></p>				<p>5. Earliest Year/Latest Year</p> <p style="margin-left: 20px;"><i>1987 to 1995</i></p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)</p> <p style="font-size: 1.2em; margin-left: 20px;"><i>Forms, correspondence</i></p> <p style="font-size: 1.2em; margin-left: 20px;"><i>Paid property tax refunds on corporation taxes, general property taxes, real property taxes & public utility. The file contains the name of people, address, amount, check number & the reason for the refund. The file also contains any letter or back up documentation for the refunds.</i></p>					
<p>7. Record Series Format(s)</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Legal Size <input type="checkbox"/> Bound Book <input type="checkbox"/> Audio Tape <input type="checkbox"/> Other (specify) _____ </div> <div style="width: 45%;"> <input type="checkbox"/> Microfilm <input type="checkbox"/> Computer Tape <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Video Tape </div> </div>		<p>8. Record Series Sequence</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____ </div> <div style="width: 45%;"> <input type="checkbox"/> Other (specify) _____ </div> </div>		<p>9. Volume</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (specify) _____ </div> <div style="width: 45%;"> <p>Number</p> <p style="font-size: 1.2em; margin-left: 20px;"><i>5 BOXES</i></p> </div> </div>	
<p>11. File is Used</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> Daily <input type="checkbox"/> Weekly </div> <div style="width: 45%;"> <p style="margin-left: 20px;"><i>Less than</i></p> <input checked="" type="checkbox"/> Monthly </div> </div>		<p>12. File Becomes Inactive After</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>Number</p> </div> <div style="width: 45%;"> <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s) </div> </div>			
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p style="font-size: 1.2em; margin-left: 20px;"><i>T.O. - Storeroom</i></p>		<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> Yes </div> <div style="width: 45%;"> <input checked="" type="checkbox"/> No </div> </div>			
<p>15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))</p>		<p>16. Audit Requirements</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal </div> <div style="width: 45%;"> <input checked="" type="checkbox"/> Independent </div> </div>			
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> Yes </div> <div style="width: 45%;"> <input checked="" type="checkbox"/> No </div> </div>		<p>18. Recommended Retention</p> <p style="font-size: 1.2em; margin-left: 20px;"><i>RETAIN FOR 5 yrs, after FY refund</i></p> <p style="font-size: 1.2em; margin-left: 20px;"><i>THEN DESTROY.</i></p>			
<p>19. Name and Title of Preparer</p>		<p>20. Telephone Number</p>		<p>21. Date</p>	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <div style="text-align: center; font-size: 1.5em;"><i>Threas.</i></div>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <div style="font-size: 1.2em;"><i>Caid</i> <i>Property Tax Refunds</i></div>				5. Earliest Year/Latest Year <div style="font-size: 1.2em;"><i>1995 to 1997</i></div>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <div style="font-size: 1.1em;"><i>Form, correspondence</i> <i>Caid property tax refunds on corporation, real property taxes, real property taxes & public utilities. The file contains the name of payee, address, amount, check number of the reason for the refund. The file also contains any letters or back up documentation for the refunds.</i></div>					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input checked="" type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____ </div> <div> <div style="border-bottom: 1px solid black; width: 50px; text-align: center; margin-bottom: 5px;"><i>2</i></div> Number </div> </div>	
11. File is Used <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly		12. File Becomes Inactive After <div style="display: flex; justify-content: space-between;"> <div> <div style="border-bottom: 1px solid black; width: 50px; text-align: center; margin-bottom: 5px;"><i>5 yrs</i></div> Number </div> <div> <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s) </div> </div>			
13. Current Location(s) (Bldg., Floor, Room) <div style="font-size: 1.2em;"><i>file cabinets in</i> <i>Threas. office - back of office</i></div>		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))		16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent			
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		18. Recommended Retention <div style="font-size: 1.5em; text-align: center;"><i>RETAIN FOR</i></div> <div style="font-size: 1.2em; text-align: center;"><i>5 yrs. after FY in which refunded,</i></div>			
19. Name and Title of Preparer		20. Telephone Number		21. Date <div style="font-size: 1.2em; text-align: center;"><i>Then Destroy.</i></div>	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
<p>1. Department/Agency <i>Treas.</i></p>		<p>2. Division</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title <i>Held (not refunded)</i></p>				<p>5. Earliest Year/Latest Year <i>1983 to 1993</i> ?</p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <i>Held refunds property tax, OPP, corp. & public utility refunds. These files are held pending information and documentation from taxpayer, mortgage co. etc. in refunds to be released, the file contain correspondence.</i></p>					
<p>7. Record Series Format(s)</p> <p><input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input checked="" type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p>Number <u>1</u></p> <p><input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify)</p>	
<p>11. File is Used</p> <p><input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly</p> <p><i>Current</i></p>		<p>12. File Becomes Inactive After</p> <p>Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)</p>			
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p><i>T.O. - file cabinet</i></p>		<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			
<p>15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))</p>		<p>16. Audit Requirements</p> <p><input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent</p>			
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>18. Recommended Retention</p> <p><i>until refunded</i> <i>Retain until refund is completed plus 5 yrs after FY</i></p>			
<p>19. Name and Title of Preparer</p>		<p>20. Telephone Number</p>		<p>21. Date <i>AND Audit Requirements have been fulfilled, then Destroy.</i></p>	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
<p>1. Department/Agency <i>Treas.</i></p>		<p>2. Division</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title <i>Listing of Unpaid Refunds 90-91 & 91-92</i></p>				<p>5. Earliest Year/Latest Year <i>90 to 92</i></p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <i>Two bound books listing all unpaid tax refunds for years 90-91 & 91-92. These books were used to release all paid refunds & to keep records of held refunds. This information has now been transferred to new word computer system.</i></p>					
<p>7. Record Series Format(s)</p> <p><input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input checked="" type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input type="checkbox"/> Alphabetical</p> <p><input checked="" type="checkbox"/> Numerical</p> <p><input type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p><i>2</i></p> <p>Number <i>BOUND BOOKS</i></p> <p><input type="checkbox"/> File Drawer(s)</p> <p><input type="checkbox"/> Microfilm Reel(s)</p> <p><input type="checkbox"/> Computer Tape(s)</p> <p><input type="checkbox"/> Other (specify) _____</p>	
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly</p>		<p>12. File Becomes Inactive After</p> <p>Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)</p> <p><i>year end audit</i></p>			
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p><i>F.O. - file cabinet</i></p>		<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>on AS 400</i></p>			
<p>15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(If Yes, cite Law(s) & Regulation(s))</p>		<p>16. Audit Requirements</p> <p><input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent</p>			
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>18. Recommended Retention <i>RETAIN FOR</i></p> <p><i>5 yrs. after FY when refunded,</i></p> <p><i>And Audits have been Then destroy.</i></p>			
<p>19. Name and Title of Preparer</p>		<p>20. Telephone Number <i>Filled</i></p>		<p>21. Date</p>	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)

DEPARTMENT OF GENERAL SERVICES
RECORDS MANAGEMENT DIVISION
7275 WATERLOO ROAD
P.O. BOX 275
JESSUP, MARYLAND 20794

AGENCY RECORDS INVENTOR

PAGE ____ OF ____

1. Department/Agency

Treasurer's

2. Division

3. Unit

DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes

4. Record Series Title

Tax Refunds

5. Earliest Year/Latest Year

83 to 84

6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)

Check Request, Correspondence.

7. Record Series Format(s)

- ☒ Letter Size ☐ Microfilm
☐ Legal Size ☐ Computer Tape
☐ Sound Book ☐ Floppy Disk
☐ Audio Tape ☐ Video Tape
☐ Other (specify) _____

8. Record Series Sequence

- ☒ Alphabetical
☐ Numerical
☐ Chronological
☐ Geographical
☐ Other (specify) _____

9. Volume

1
Number

- ☐ File Drawer(s)
☐ Microfilm Reel(s)
☐ Computer Tape(s)
☒ Other (specify) _____

10. Annual Accumulation

Number

- ☐ File Drawer(s)
☐ Microfilm Reel(s)
☐ Computer Tape(s)
☐ Other (specify) _____

11. File is Used

- ☐ Daily ☐ Weekly ☐ Monthly

12. File Becomes Inactive After

- _____
Number ☐ Month(s) ☐ Year(s)

13. Current Location(s) (Bldg., Floor, Room)

Storage Building

14. Is Record Series Duplicated Elsewhere?

- (If yes, specify agency or office)
☐ Yes ☒ No

15. Access Restrictions ☐ Yes ☐ No
(If Yes, cite Law(s) & Regulation(s))

16. Audit Requirements

- ☐ None ☐ State ☐ Federal ☒ Independent

17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)

- ☐ Yes ☒ No

18. Recommended Retention

RETAIN FOR
5 yrs after FY, then
Destroy.

19. Name and Title of Preparer

20. Telephone Number

21. Date

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
<p>1. Department/Agency <i>Treas.</i></p>		<p>2. Division</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title <i>Pmt Allocation Updates</i></p>				<p>5. Earliest Year/Latest Year <i>7-1-93 to 6-30-96</i> <i>except 9/30/94 - 9/30/94</i></p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)</p> <p><i>Cashier updates & queries, pmt edit listing, pmt updated & allocation, recals & adjustments on tax accts, interest updates, accts flagged for returned checks.</i></p> <p><i>To pay pmts to outstanding taxes</i></p>					
<p>7. Record Series Format(s)</p> <p><input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input checked="" type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p><i>17 boxes</i></p> <p>Number</p> <p><input type="checkbox"/> File Drawer(s)</p> <p><input type="checkbox"/> Microfilm Reel(s)</p> <p><input type="checkbox"/> Computer Tape(s)</p> <p><input checked="" type="checkbox"/> Other (specify)</p>	
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly</p> <p><i>When Needed</i></p>		<p>12. File Becomes Inactive After</p> <p>_____ Number</p> <p><input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)</p>			
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p><i>Trea Off</i></p>		<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			
<p>15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(If Yes, cite Law(s) & Regulation(s))</p>		<p>16. Audit Requirements</p> <p><input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent</p>			
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>18. Recommended Retention</p> <p><i>RETAIN FOR 5 yrs after FY Then</i> <i>AND Audits have been fulfilled. Destroy</i> <i>Then Destroy.</i></p>			
<p>19. Name and Title of Preparer</p>		<p>20. Telephone Number</p>		<p>21. Date <i>Then Destroy.</i></p>	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <div style="text-align: center; font-size: 1.2em;">Treas.</div>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <div style="text-align: center; font-size: 1.2em;">Pmt Allocation Update</div>				5. Earliest Year/Latest Year <div style="text-align: center;">9-27-94 to 9-30-94</div>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <div style="text-align: center;"> Pmt Edit listing Edit Detail Pmt absent update Pmt update Purpose - To post pmts to outstanding taxes </div>					
7. Record Series Format(s) <input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input checked="" type="checkbox"/> Other (specify) <div style="text-align: center;">Binder</div>		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify)		9. Volume <div style="text-align: center;">8 binders</div> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify)	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <div style="text-align: center;">When Needed</div>		12. File Becomes Inactive After <div style="text-align: center;">Number</div> <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)			
13. Current Location(s) (Bldg., Floor, Room) <div style="text-align: center; font-size: 1.2em;">T.O.</div>		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))		16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent			
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		18. Recommended Retention <div style="text-align: center; font-size: 1.2em;"> RETAIN FOR 5yr after FY, Then Destroy </div>			
19. Name and Title of Preparer		20. Telephone Number		21. Date	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p> <hr/> <p>PAGE ____ OF ____</p>	
<p>1. Department/Agency</p> <p style="font-size: 1.5em; margin-left: 40px;">Treasury</p>		<p>2. Division</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title</p> <p style="font-size: 1.5em; margin-left: 40px;">Gay Daily - Part A/loc</p>				<p>5. Earliest Year/ Latest Year</p> <p style="margin-left: 40px;">1985 to 1987</p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)</p> <p style="font-size: 1.5em; margin-left: 40px;">Computer printouts</p>					
<p>7. Record Series Format(s)</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> Letter Size <input type="checkbox"/> Legal Size <input checked="" type="checkbox"/> Bound Book <input type="checkbox"/> Audio Tape <input type="checkbox"/> Other (specify) _____ </div> <div style="width: 45%;"> <input type="checkbox"/> Microfilm <input type="checkbox"/> Computer Tape <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Video Tape </div> </div>		<p>8. Record Series Sequence</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Alphabetical <input checked="" type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____ </div> <div style="width: 45%;"> </div> </div>		<p>9. Volume</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p style="font-size: 1.5em; margin-left: 40px;">19</p> <p>Number</p> <p style="font-size: 1.5em; margin-left: 40px;">Bundles</p> </div> <div style="width: 45%;"> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (specify) _____ </div> </div>	
<p>11. File is Used</p> <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly </div>		<p>12. File Becomes Inactive After</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>Number _____</p> </div> <div style="width: 45%;"> <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s) </div> </div>			
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p style="font-size: 1.5em; margin-left: 40px;">Storage Building</p>		<p>14. Is Record Series Duplicated Elsewhere?</p> <p>(If yes, specify agency or office)</p> <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </div>			
<p>15. Access Restrictions</p> <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> Yes <input type="checkbox"/> No </div> <p>(If Yes, cite Law(s) & Regulation(s))</p>		<p>16. Audit Requirements</p> <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent </div>			
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </div>		<p>18. Recommended Retention</p> <p style="font-size: 1.5em; margin-left: 40px;">RETAIN FOR 3 yr after FY, Then DESTROY.</p>			
<p>19. Name and Title of Preparer</p>		<p>20. Telephone Number</p>		<p>21. Date</p>	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
<p>1. Department/Agency <i>Treas.</i></p>		<p>2. Division</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title <i>Balance! over Tax Sale</i></p>				<p>5. Earliest Year/Latest Year <i>85 to 90</i></p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <i>Correspondence Check Request, Assessments, settlement sheet, deeds, decree, Lotus spread sheets, copies of Drivers license, affidavits, memoras, death Certificates, disbursements of Heirs, Last Will & Testament, Petition for letters Testamentary, Estate Inventory, appraise of Real Estate, list of interested persons (Register of Wills), Tax Bills, Certified receipts, Balance over Tax Sale Receipt, Newspaper printout & Courthouse listing, certificate of sale, old correspondence, Receipts from certified letters. The purpose is to show proof of the ownership of heirs which owned the property.</i> </p>					
<p>7. Record Series Format(s)</p> <p><input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input checked="" type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p><i>1/3</i> Number</p> <p><input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____</p>	
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly</p>		<p>12. File Becomes Inactive After</p> <p>Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)</p>			
<p>13. Current Location(s) (Bldg., Floor, Room) <i>desk, black file cabinet, and file drawer TO</i></p>		<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			
<p>15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))</p>		<p>16. Audit Requirements</p> <p><input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent</p>			
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>18. Recommended Retention <i>RETAIN FOR 5 yrs from FY disbursed, Then Destroy.</i></p>			
<p>19. Name and Title of Preparer</p>		<p>20. Telephone Number</p>		<p>21. Date</p>	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <i>Treasurer</i>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purpose					
4. Record Series Title <i>Balance Over Tax Sale</i>				5. Earliest Year/Latest Year <i>71 to 83</i>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <i>check request, correspondence</i>					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Sound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input checked="" type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape <input checked="" type="checkbox"/> Other (specify) <i>Box</i> Number _____	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly		12. File Becomes Inactive After <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s) Number _____			
13. Current Location(s) (Bldg., Floor, Room) <i>Storage Building</i>		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
15. Access Restrictions <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))		16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent			
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		18. Recommended Retention <i>RETAIN FOR 5 yrs from disbursement then destroy.</i>			
19. Name and Title of Preparer		20. Telephone Number		21. Date	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p> <hr/> <p>PAGE ____ OF ____</p>	
<p>1. Department/Agency <i>Treas.</i></p>		<p>2. Division</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title <i>Bankruptcy Dead files</i></p>				<p>5. Earliest Year/Latest Year <i>1983 to 1995</i></p>	
<p>6. Record Series Description (Briefly describe the types of informationn/documents/forms found in the series. Include the purpose or function of the series.)</p> <p><i>Closed Bankruptcy cases - forms corresponding containing bankruptcy proceedings & discharge of debtors form</i></p>					
<p>7. Record Series Format(s)</p> <p><input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input checked="" type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p><i>2</i> Number</p> <p><input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (specify) <i>2 BOXES storage</i></p>	
<p>10. Annual Accumulation</p> <p><i>2</i> Number</p> <p><input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) <i>expanding files</i></p>					
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly</p>			<p>12. File Becomes Inactive After</p> <p>Number _____ Month(s) _____ Year(s) _____</p> <p><i>discharge</i></p>		
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p><i>Treas. off. 4th floor room</i></p>			<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>United States Bankruptcy Court</i></p>		
<p>15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(If Yes, cite Law(s) & Regulation(s))</p>			<p>16. Audit Requirements</p> <p><input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent</p>		
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			<p>18. Recommended Retention</p> <p><i>RETAIN FOR 2 yrs after FY in which BK case was discharged & dismissed, Then Destroy.</i></p>		
<p>19. Name and Title of Preparer</p>		<p>20. Telephone Number</p>		<p>21. Date</p>	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p>	
				<p>PAGE ____ OF ____</p>	
<p>1. Department/Agency</p> <p style="text-align: center; font-size: 1.2em;"><i>Files.</i></p>		<p>2. Division</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title</p> <p style="font-size: 1.2em;"><i>Exempt Exot ^{special} Assessment changed</i></p>				<p>5. Earliest Year/Latest Year</p> <p style="font-size: 1.2em;"><i>1981 to 1995</i></p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)</p> <p style="font-size: 1.2em;"><i>(these forms) are used to increase or decrease a special assessment for current and prior years. This is the authorization to make corrections to the tax roll</i></p>					
<p>7. Record Series Format(s)</p> <p><input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>8. Record Series Sequence</p> <p><input type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input checked="" type="checkbox"/> Chronological <i>date of notification</i></p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p style="text-align: right;"> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____ </p> <p>Number <i>1 BOX</i></p>	
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly</p> <p style="text-align: center; font-size: 1.2em;"><i>yearly</i></p>		<p>12. File Becomes Inactive After</p> <p style="text-align: right;"> <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s) </p> <p>Number _____</p>			
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p style="text-align: center; font-size: 1.2em;"><i>storage room?</i></p>		<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p style="text-align: right; font-size: 1.2em;"><i>PGM</i></p>			
<p>15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(If Yes, cite Law(s) & Regulation(s))</p>		<p>16. Audit Requirements</p> <p style="text-align: right;"> <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent </p>			
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>18. Recommended Retention</p> <p style="font-size: 1.5em; text-align: center;"><i>RETAIN FOR</i></p> <p style="font-size: 1.5em; text-align: center;"><i>5 yrs after FX; THEN</i></p>			
<p>19. Name and Title of Preparer</p>		<p>20. Telephone Number</p>		<p>21. Date <i>DESTROY</i></p>	

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY PAGE ____ OF ____	
1. Department/Agency <div style="font-size: 1.5em; font-family: cursive;">Treas.</div>		2. Division		3. Unit	
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title <div style="font-size: 1.2em; font-family: cursive;">Paid tax receipts</div>				5. Earliest Year/Latest Year <div style="font-size: 1.2em; font-family: cursive;">1996 to 1997</div>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <div style="font-size: 1.2em; font-family: cursive;"> This is a file of all paid taxpayer receipts. This file contains records of tax paid & validated by cashier </div>					
7. Record Series Format(s) <input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____ <div style="font-size: 1.2em; font-family: cursive;">3" x 8 1/2"</div>		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <div style="font-size: 1.2em; font-family: cursive;">2</div> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____ 10. Annual Accumulation <div style="font-size: 1.2em; font-family: cursive;">7</div> Number <div style="font-size: 1.2em; font-family: cursive;">storage boxes</div>	
11. File is Used <input checked="" type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly			12. File Becomes Inactive After _____ Number <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)		
13. Current Location(s) (Bldg., Floor, Room) <div style="font-size: 1.2em; font-family: cursive;">T.O. - file cabinet</div>			14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
15. Access Restrictions <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))			16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent		
17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			18. Recommended Retention <div style="font-size: 1.2em; font-family: cursive;"> RETAIN FOR 3 YRS AND UNTIL AUDIT 3 yrs. after FY Requirements have been fulfilled, then Destroy. </div>		
19. Name and Title of Preparer		20. Telephone Number		21. Date	

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>		<p>AGENCY RECORDS INVENTORY</p> <p>PAGE ____ OF ____</p>	
<p>1. Department/Agency <i>Treas.</i></p>		<p>2. Division</p>		<p>3. Unit</p>	
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>					
<p>4. Record Series Title <i>pd Tax Repts</i></p>				<p>5. Earliest Year/Latest Year <i>7-1-91 to 6-30-96</i></p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)</p> <p><i>pd tax repts, some have backup documents.</i></p> <p><i>To ensure print on tax accts.</i></p>					
<p>7. Record Series Format(s)</p> <p><input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) <i>anh size</i> <i>~ 5" x 8 1/2"</i></p>		<p>8. Record Series Sequence</p> <p><input type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input checked="" type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify)</p>		<p>9. Volume</p> <p><i>13 mves</i></p> <p>Number</p> <p><input type="checkbox"/> File Drawer(s)</p> <p><input type="checkbox"/> Microfilm Reel(s)</p> <p><input type="checkbox"/> Computer Tape(s)</p> <p><input type="checkbox"/> Other (specify)</p>	
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly</p> <p><i>When Needed</i></p>		<p>12. File Becomes Inactive After</p> <p>Number <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)</p>			
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p><i>Treas Off - storeroom</i></p>		<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			
<p>15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(If Yes, cite Law(s) & Regulation(s))</p>		<p>16. Audit Requirements</p> <p><input type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent</p>			
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>18. Recommended Retention</p> <p><i>RETAIN FOR 3 YR</i> <i>AND UNTIL ALL AUDIT</i> <i>3 yrs after</i> <i>Requirements have been</i> <i>Fulfilled, Then Destroy.</i></p>			
<p>19. Name and Title of Preparer</p>		<p>20. Telephone Number</p>		<p>21. Date</p>	