



OFFICE OF CENTRAL SERVICES

Schedule No.
C-1399

Records Management Division

Page No.
1 of 4

RECORDS RETENTION AND DISPOSAL SCHEDULE

AGENCY: Office of Central Services **DIVISION:** Risk Management

Item No.	Description	Retention
<u>SUPERCEDES SCHEDULE C-906 dated 11/9/99</u>		
1.	<u>General Correspondence</u> Original incoming letters, copies of outgoing letters, memoranda, studies, staff-meeting minutes, reports, directives, policies and other material related to the administration of the division.	Retain for 1 year, then screen annually and destroy any material no longer needed for current business with the following exception: Transfer to the Maryland State Archive for permanent retention any material that serves to document the origin, development, and accomplishments of the office and has continuing administrative, fiscal, legal, or historical value
2.	<u>General Accounting Records</u> Records, our office copies of commitments, direct payments, purchase orders, requisitions, and goods received memoranda, travel and expense reports, mileage reports, cash receipts and tuition reimbursements.	Retain for four (4) years then destroy.
3.	<u>Special Accounting Records</u> Audit reports (internal and external, financial or program).	Retain for (4) years, then transfer to the Maryland State Archives.
4.	<u>Personnel Files</u> Files contain information on current and past employees. A. Files may contain, but are not limited to copies of employment applications, annual performance reviews, reprimands and disciplinary actions, awards, doctor slips, accident reports, resumes, etc. B. Reclassifications	Retain for three (3) years after termination then destroy. Retain for three (3) years after reclassification decision is rendered then destroy.

Schedule Approved by Agency or Division Representative

9/7/18

Date

[Signature]

Signature

Schedule Approved by State Archivist

Schedule Approved by Records Management Officer

9/7/18

Date

[Signature]

Signature

1-6-2020

Date

[Signature]

Signature



OFFICE OF CENTRAL SERVICES

Records Management Division

Schedule No.

C-1399

Page No.

2

of

4

**RECORDS RETENTION AND DISPOSAL SCHEDULE
(Continuation Sheet)**

AGENCY:

Office of Central Services

DIVISION:

Risk Management

Item No.	Description	Retention
5.	<u>Interviews</u> Files contain completed questionnaires, resumes, position announcement, interview schedule and interview questions.	Retain for three (3) years then destroy.
6.	<u>Payroll</u> A. Time sheets and leave request forms B. Leave Reports C. Payroll Registers	Retain for three (3) years then destroy. Retain for sixty (60) days then destroy. Retain for two (2) pay periods then destroy.
7.	<u>Safety</u> Records related to the safety risk management functions of the division under the following subject titles. A. Safety General – Correspondence information, research or special programs, procedures and policies. B. Inspections, Complaints and Investigation Files – Files contain case history of safety inspections and investigations conducted as well as complaints handled.	Retain for one (1) year, then screen annually and destroy any material no longer needed for current business with the following exception: Transfer to the Maryland State Archive for permanent retention any material that serves to document the origin, development, and accomplishments of the office and has continuing administrative, fiscal, legal, or historical value. If material is scanned, all scans must be done in accordance with Maryland State Archives standards and paper will be destroyed and images will follow the above retention requirements. Retain for three (3) years, then screen annually and destroy any material no longer needed for current business.



OFFICE OF CENTRAL SERVICES

Records Management Division

Schedule No.
C-1399

Page No.
3 of 4

**RECORDS RETENTION AND DISPOSAL SCHEDULE
(Continuation Sheet)**

AGENCY: Office of Central Services **DIVISION:** Risk Management

Item No.	Description	Retention
	<p>C. Hazardous and Toxic Substances Files (Maryland Occupational Safety and Health – MOSH) – Files contain information concerning manufacturers Safety Data Sheets (SDS), employers generated chemical lists with SDS attached and information distributed to employees to make them aware of where chemicals are used and protection to be used when working with these chemicals.</p> <p>D. Occupational Safety and Health Administration (OSHA) Files contain information on safety violations, personal injury, and general safety for Bureau of Labor Statistics (State and Federal agencies).</p> <p>E. Maryland Occupational Safety Health Files (MOSH) contain information on safety violations, personal injury, and general safety for Bureau of Labor Statistics (State and Federal agencies).</p> <p>F. Training Files – Files contain attendance records, course descriptions and dates given.</p>	<p>Retain for forty (40) years then destroy.</p> <p>Retain OSHA records for five (5) years then destroy.</p> <p>Retain MOSH records for three (3) years then destroy.</p> <p>Retain files for three years from class date then destroy.</p>
8.	<p><u>Self-Insurance Fund</u> Records related to the self-insuring functions of the division under the following subject titles</p> <p>A. Self-Insurance Fund Committee – Consists of required Self-Insurance Fund Committee meetings, minutes and related supporting legal, policy, directives and general correspondence.</p> <p>B. Workers' Compensation Files</p> <p>Open & active Workers' Compensation claim files</p> <p>Closed Workers' Compensation claim files</p>	<p>Permanent. Retain for 50 years, then transfer to the Maryland States Archives for permanent retention. If scanned, scan paper in accordance with Maryland State Archives standards, destroy paper and transfer images to the Maryland State Archives.</p> <p>Retain until file can be placed in closed files.</p> <p>Retain for forty (40) years then destroy.</p>



OFFICE OF CENTRAL SERVICES

Records Management Division

Schedule No.	C-1399		
Page No.	4	of	4

**RECORDS RETENTION AND DISPOSAL SCHEDULE
(Continuation Sheet)**

AGENCY: Office of Central Services **DIVISION:** Risk Management

Item No.	Description	Retention
	<p>C. General Liability Files</p> <p>Open and active Liability claims against the Self-Insurance Fund other than auto.</p> <p>Closed General Liability files</p> <p>D. Automobile Liability and Comprehensive/Collision Files</p> <p>Open and active vehicle liability, collision or comprehensive claims</p> <p>Closed Auto files</p> <p>E. Miscellaneous Claims – Contains claims against the County that are not contained in 7.C & D.</p> <p>Litigation Hold: When litigation of a particular matter commences, or is reasonably anticipated, the Office of Law will institute a litigation hold to persons involved in the case. The litigation hold is a memorandum directing that information relevant to the litigation, including electronically stored information, must be preserved and not destroyed. The details of what is required will be addressed in the litigation hold memorandum. It is imperative that all recipients adhere to the directions of the litigation hold, even if it is contrary to the directives of this retention policy. Questions regarding how to adhere to the instructions in the litigation hold can be addressed with the Office of Law and/or Office of Information Technology. The Office of Law will notify individuals when they are no longer subject to the litigation hold.</p>	<p>Retain until file can be placed in closed files.</p> <p>Retain for five (5) years then destroy. If minor involved, retain for 5 years past 18th birthday, then destroy.</p> <p>Retain until file can be placed in closed files.</p> <p>Retain for five (5) years then destroy. If minor involved, retain for 5 years past 18th birthday, then destroy.</p> <p>Maintain for five (5) years after occurrence date then destroy.</p>

<p><u>Instructions</u> -Type or Print a separate form for each new or revised record series. Forward with Records Retention Schedule (DGS 550-1)</p>	<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 Waterloo Road, P.O. Box 275 Jessup, Maryland 20794 410-789-1930</p>	<p>AGENCY RECORDS INVENTORY</p> <p>PAGE <u>1</u> OF <u>20</u></p>
<p>1. Department/Agency Central Services/Risk Management</p>	<p>2. Division Insurance</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 General Correspondence</p>	<p>5. Earliest Year/Latest Year <u>2016</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.) Original incoming letters, copies of outgoing letters, memoranda, studies, staff meeting minutes, reports, directives, policies and other material related to the administration of the division.</p>		
<p>7. Record Series Format(s) List all</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"/> Audio Tape <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Bound Book <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 <u>2</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>10. Annual Accumulation <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 type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Annually</p>	<p>12. File Becomes Inactive After <u>1</u> Number <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)</p>	
<p>13. Current Location(s) (Bldg., Floor, Room) 2660 Riva Road, 3rd Floor</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 (If Yes, cite Law(s) & Regulation(s)) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>16. Audit Requirements <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 requirements <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>18. Recommended Retention Retain for 1 year, then screen annually and destroy any material no longer needed for current business with the following exception: Transfer to the Maryland State Archive for permanent retention any material that serves to document the origin, development, and accomplishments of the office and has continuing administrative, fiscal, legal, or historical value.</p>	
<p>19. Name and Title of Preparer Helen Cosner, OSA II</p>	<p>20. Telephone Number 410-222-7630</p>	<p>21. Date 07/20/17</p>

<p><u>Instructions</u> -Type or Print a separate form for each new or revised record series. Forward with Records Retention Schedule (DGS 550-1)</p>		<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 Waterloo Road, P.O. Box 275 Jessup, Maryland 20794 410-799-1930</p>		<p>AGENCY RECORDS INVENTORY</p> <p>PAGE <u>2</u> OF <u>20</u></p>	
<p>1. Department/Agency Central Services/Risk Management</p>		<p>2. Division Insurance</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 General Accounting Records</p>				<p>5. Earliest Year/Latest Year <u>2014</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.) Records, our office copies of commitments, direct payments, purchase orders, requisitions, and goods received memoranda, travel and expense reports, mileage reports, cash receipts and tuition reimbursements.</p>					
<p>7. Record Series Format(s) List all</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"/> Audio Tape <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Bound Book <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 checked="" type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>		<p>9. Volume</p> <p><u>4</u> Number</p> <p><input checked="" 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>10. Annual Accumulation</p> <p><u>1/2</u> Number</p> <p><input checked="" 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 checked="" type="checkbox"/> Monthly <input type="checkbox"/> Annually</p>			<p>12. File Becomes Inactive After</p> <p><u>4</u> Number <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)</p>		
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p>2660 Riva Road, 3rd Floor</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 (If Yes, cite Law(s) & Regulation(s))</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</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 requirements</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			<p>18. Recommended Retention</p> <p>Retain for four (4) years then destroy.</p>		
<p>19. Name and Title of Preparer</p> <p>Helen Cosner, OSA II</p>		<p>20. Telephone Number</p> <p>410-222-7630</p>		<p>21. Date</p> <p>7/20/17</p>	

INSTRUCTIONS – TYPE OR PRINT A SEPARATE FORM FOR EACH NEW/REVISED ELECTRONIC RECORD SERIES. FORWARD WITH RECORDS RETENTION SCHEDULE (DGS 550-1) COMAR 14.18.02		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD, P.O. BOX 275 JESSUP, MARYLAND 20794 (410) 799-1930		ELECTRONIC RECORDS INVENTORY Page <u>3</u> of <u>20</u>	
1 DEPARTMENT/AGENCY Central Services /Risk Management		2 DIVISION Insurance		3 UNIT	
DEFINITION – Record Series - A group of related records stored electronically and used as a unit for reference as well as retention and disposition purposes					
4 ELECTRONIC RECORD SERIES TITLE General Accounting Records				5 EARLIEST YEAR/LATEST YEAR <u>2013</u> TO <u>Present</u>	
6 INPUT - Identify source of information to be entered Financial information			7 OUTPUT - Identify the use/s of information generated by system Reconcile of credit card statements, receipts, purchases, and travel and mileage reports.		
8 ELECTRONIC RECORD SERIES DESCRIPTION - Briefly describe the information/documents/forms Contained in a series. Include purpose and function of the system. Commitments, direct payments, purchase orders, travel and expense reports, mileage reports and cash receipts.					
9 POLICY ON ACCESS AND USE – Explain or attach copy if established in writing. Accessed by Risk Management personnel					
10 UPDATING CYCLES OR CONDITIONS AND RULES FOR REVISING INFORMATION IN THE SYSTEM Update as needed.					
11 SPECIFY THE LOCATION AND MEDIA OF THE MAIN ELECTRONIC DATA FILE. Explain the progression established to Ensure the record's retention and usability throughout the record's authorized life cycle. Stored on our network - J Drive					
12 RECOMMENDED RETENTION 4 years then destroy					
13 TYPED OR PRINTED NAME OF PREPARER Helen Cosner		14 TELEPHONE NUMBER 410-222-7633		15 DATE 7/20/17	
16 TITLE OF PREPARER OSAI					
DGS 550-6 (rev. 10/12)					

INSTRUCTIONS – Type or print a separate form for each new/revise electronic record series. Forward with Records Retention Schedule (DGS 550-1) COMAR 14.18.02		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 Waterloo Road, P.O. Box 275 Jessup, Maryland 20794 (410) 799-1930		ELECTRONIC RECORDS INVENTORY	
				Page <u>3A</u> of <u>20</u>	
1 DEPARTMENT/AGENCY Central Services/Risk Management		2 DIVISION Insurance		3 UNIT	
DEFINITION – Record Series - A group of related records stored electronically and used as a unit for reference as well as retention and disposition purposes					
4 ELECTRONIC RECORD SERIES TITLE Special Accounting Records				5 EARLIEST YEAR/LATEST YEAR <u>2015</u> TO <u>Present</u>	
6 INPUT - Identify source of information to be entered Audit reports			7 OUTPUT - Identify the use/s of information generated by system Evaluate financial or program processes		
8 ELECTRONIC RECORD SERIES DESCRIPTION - Briefly describe the information/documents/forms contained in a series. Include purpose and function of the system. Audit reports (internal and external, financial or program).					
9 POLICY ON ACCESS AND USE – Explain or attach copy if established in writing. Information will be kept as view only on shared drive.					
10 UPDATING CYCLES OR CONDITIONS AND RULES FOR REVISING INFORMATION IN THE SYSTEM Update when audit report is complete. Information will not be revised; amendments or addenda can be added to ensure thorough documentation.					
11 SPECIFY THE LOCATION AND MEDIA OF THE MAIN ELECTRONIC DATA FILE. Explain the progression established to ensure the record's retention and usability throughout the record's authorized life cycle. Stored on network - shared J Drive					
12 RECOMMENDED RETENTION 4 years then destroy					
13 TYPED OR PRINTED NAME OF PREPARER Nicole Liening		14 TELEPHONE NUMBER 410-222-1591		15 DATE 4/10/2019	
16 TITLE OF PREPARER Manager, Safety and Insurance					
DGS 550-6 (rev. 10/12)					

<p>Instructions –Type or Print a separate form for each new or revised record series. Forward with Records Retention Schedule (DGS 550-1)</p>	<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 Waterloo Road, P.O. Box 275 Jessup, Maryland 20794 410-788-1830</p>	<p>AGENCY RECORDS INVENTORY</p> <p>PAGE <u>4</u> OF <u>20</u></p>
1. Department/Agency Central Services/Risk Management	2. Division Insurance	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>		
4A. Record Series Title Personnel Files <u>4A</u>		5. Earliest Year/Latest Year <u>2012 to Present</u>
<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.) Files may contain, but are not limited to copies of employment applications, annual performance reviews, reprimands and disciplinary actions, awards, doctor slips, accident reports, resumes, etc.</p>		
<p>7. Record Series Format(s) List all</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"/> Audio Tape <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Bound Book <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 checked="" type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>	<p>9. Volume</p> <p><u>4</u> Number</p> <p><input checked="" 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> <hr/> <p>10. Annual Accumulation</p> <p><u>1/4</u> Number</p> <p><input checked="" 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 checked="" type="checkbox"/> Monthly <input type="checkbox"/> Annually</p>		<p>12. File Becomes Inactive After</p> <p><u>3</u> Number <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)</p>
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p>2660 Riva Road, 3rd Floor</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 (If Yes, cite Law(s) & Regulation(s))</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</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 requirements</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>18. Recommended Retention</p> <p>Retain for three (3) years after termination then destroy.</p>
19. Name and Title of Preparer Helen Cosner, OSA II	20. Telephone Number 410-222-7630	21. Date 7/20/17

Instructions - Type or Print a separate form for each new or revised record series. Forward with Records Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 Waterloo Road, P.O. Box 275 Jessup, Maryland 20794 410-789-1930		AGENCY RECORDS INVENTORY PAGE <u>5</u> OF <u>20</u>	
1. Department/Agency Central Services/Risk Management		2. Division Insurance		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.					
4B. Record Series Title Personnel Files - Reclassifications <u>4B</u>				5. Earliest Year/Latest Year <u>2014</u> to Present	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) Files may contain, but are not limited to copies of employment applications, annual performance reviews, reprimands and disciplinary actions, awards, doctor slips, accident reports, resumes, etc.					
7. Record Series Format(s) List all <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Audio Tape <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Bound Book <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 <u>1</u> 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 <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 type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Annually			12. File Becomes Inactive After <u>3</u> Number <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)		
13. Current Location(s) (Bldg., Floor, Room) 2660 Riva Road, 3 rd Floor			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 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 requirements <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			18. Recommended Retention Retain for three (3) years after decision is rendered then destroy.		
19. Name and Title of Preparer Helen Cosner, OSA II		20. Telephone Number 410-222-7630		21. Date 7/20/17	

<p>Instructions –Type or Print a separate form for each new or revised record series. Forward with Records Retention Schedule (DGS 550-1)</p>	<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 Waterloo Road, P.O. Box 275 Jessup, Maryland 20794 410-798-1930</p>	<p>AGENCY RECORDS INVENTORY</p> <p>PAGE <u>6</u> OF <u>20</u></p>
<p>1. Department/Agency Central Services/Risk Management</p>	<p>2. Division Insurance</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 Self Insurance Fund Interviews</p>	<p>5. Earliest Year/Latest Year 2013 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.) Files contain completed questionnaires, resumes, position announcement, interview schedule and interview questions</p>		
<p>7. Record Series Format(s) List all</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"/> Audio Tape <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Bound Book <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 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 Number</p> <p><u>1</u></p> <p><input checked="" 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> <hr/> <p>10. Annual Accumulation</p> <p><u>1</u></p> <p>Number</p> <p>___ 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) <u>FILE FOLDER</u></p>
<p>11. File Is Used</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Annually</p>	<p>12. File Becomes Inactive After</p> <p><u>3</u></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>2660 Riva Road, 3rd Floor</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 (If Yes, cite Law(s) & Regulation(s))</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</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 requirements</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>18. Recommended Retention</p> <p>Retain for three (3) years then destroy</p>	
<p>19. Name and Title of Preparer</p> <p>Helen Cosner, OSA II</p>	<p>20. Telephone Number</p> <p>410-222-7630</p>	<p>21. Date</p> <p>7/20/17</p>

<p>Instructions –Type or Print a separate form for each new or revised record series. Forward with Records Retention Schedule (DGS 550-1)</p>	<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 Waterloo Road, P.O. Box 275 Jessup, Maryland 20794 410-789-1930</p>	<p>AGENCY RECORDS INVENTORY</p> <p>PAGE <u>7</u> OF <u>20</u></p>
<p>1. Department/Agency Central Services/Risk Management</p>	<p>2. Division Insurance</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 Payroll <u>6A</u></p>	<p>5. Earliest Year/Latest Year <u>2014</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.) A. Time sheets and leave request forms</p>		
<p>7. Record Series Format(s) List all</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"/> Audio Tape <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Bound Book <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 checked="" type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>	<p>9. Volume Number <u>2</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>10. Annual Accumulation Number <u>1/2</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 type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annually</p>	<p>12. File Becomes Inactive After</p> <p><u>3</u> Number <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)</p>	
<p>13. Current Location(s) (Bldg., Floor, Room) 2660 Riva Road, 3rd Floor</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 (If Yes, cite Law(s) & Regulation(s).)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</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 requirements</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>18. Recommended Retention</p> <p>Retain for three (3) years then destroy.</p>	
<p>19. Name and Title of Preparer Helen Cosner, OSA II</p>	<p>20. Telephone Number 410-222-7630</p>	<p>21. Date 7/20/17</p>

<p>Instructions –Type or Print a separate form for each new or revised record series. Forward with Records Retention Schedule (DGS 550-1)</p>	<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 Waterloo Road, P.O. Box 275 Jessup, Maryland 20794 410-788-1830</p>	<p>AGENCY RECORDS INVENTORY</p> <p>PAGE <u>8</u> OF <u>20</u></p>
<p>1. Department/Agency Central Services/Risk Management</p>	<p>2. Division Insurance</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 Payroll <u>6B</u></p>	<p>5. Earliest Year/Latest Year <u>2018</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.) B. Leave Reports</p>		
<p>7. Record Series Format(s) List all</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"/> Audio Tape <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Bound Book <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 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</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>10. Annual Accumulation</p> <p><u>1</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>Folders</u></p>
<p>11. File Is Used</p> <p><input type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annually</p>	<p>12. File Becomes Inactive After</p> <p><u>2</u> Number <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)</p>	
<p>13. Current Location(s) (Bldg., Floor, Room) 2660 Riva Road, 3rd Floor</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 (If Yes, cite Law(s) & Regulation(s))</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</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 requirements</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>18. Recommended Retention</p> <p>Retain for sixty (60) days then destroy.</p>	
<p>19. Name and Title of Preparer Helen Cosner, OSA II</p>	<p>20. Telephone Number 410-222-7630</p>	<p>21. Date 7/20/17</p>

<p><u>Instructions</u> -Type or Print a separate form for each new or revised record series. Forward with Records Retention Schedule (DGS 550-1)</p>	<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION .7275 Waterloo Road, P.O. Box 275 Jessup, Maryland 20794 410-799-1830</p>	<p>AGENCY RECORDS INVENTORY</p> <p>PAGE <u>9</u> OF <u>20</u></p>
<p>1. Department/Agency Central Services/Risk Management</p>	<p>2. Division Insurance</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 Payroll <u>6C</u></p>	<p>5. Earliest Year/Latest Year <u>2018</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.) C. Payroll Registers</p>		
<p>7. Record Series Format(s) List all</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"/> Audio Tape <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Bound Book <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 checked="" type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>	<p>9. Volume <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>10. Annual Accumulation <u>1</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>Folder</u></p>
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Annually</p>	<p>12. File Becomes Inactive After <u>2</u> Number <input checked="" type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)</p>	
<p>13. Current Location(s) (Bldg., Floor, Room) 2660 Riva Road, 3rd Floor</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 (If Yes, cite Law(s) & Regulation(s)) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>16. Audit Requirements <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 requirements <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>18. Recommended Retention Retain for two (2) pay periods then destroy.</p>	
<p>19. Name and Title of Preparer Helen Cosner, OSA II</p>	<p>20. Telephone Number 410-222-7630</p>	<p>21. Date 7/20/17</p>

<p>Instructions –Type or Print a separate form for each new or revised record series. Forward with Records Retention Schedule (DGS 550-1)</p>	<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 Waterloo Road, P.O. Box 275 Jessup, Maryland 20794 410-793-1830</p>	<p>AGENCY RECORDS INVENTORY</p> <p>PAGE <u>10</u> OF <u>20</u></p>
<p>1. Department/Agency Central Services/Risk Management</p>	<p>2. Division Safety</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 Safety A. Safety General <u>7A</u></p>	<p>5. Earliest Year/Latest Year <u>1977</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.) Records related to the safety risk management functions of the division under the following subject titles: Safety General – Correspondence information, research, or special programs, procedures and policies.</p>		
<p>7. Record Series Format(s) List all</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"/> Audio Tape <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Bound Book <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 <u>2</u> Number</p> <p><input checked="" 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>10. Annual Accumulation <u>1</u> Number</p> <p><input checked="" 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 checked="" type="checkbox"/> Monthly <input type="checkbox"/> Annually</p>	<p>12. File Becomes Inactive After <u>1</u> Number <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)</p>	
<p>13. Current Location(s) (Bldg., Floor, Room) 2860 Riva Road, 3rd Floor</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 (If Yes, cite Law(s) & Regulation(s)) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>16. Audit Requirements <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 requirements <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>18. Recommended Retention Retain for one (1) year, then screen annually and destroy any material no longer needed for current business with the following exception: Transfer to the Maryland State Archive for permanent retention any material that serves to document the origin, development, and accomplishments of the office and has continuing administrative, fiscal, legal, or historical value. If material is scanned, all scans must be done in accordance with Maryland State Archives standards and paper will be destroyed and images will follow the above retention requirements.</p>	
<p>19. Name and Title of Preparer Helen Cosner, OSA II</p>	<p>20. Telephone Number 410-222-7630</p>	<p>21. Date 7/20/17</p>

<p>Instructions - Type or Print a separate form for each new or revised record series. Forward with Records Retention Schedule (DGS 550-1)</p>	<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 Waterloo Road, P.O. Box 275 Jessup, Maryland 20794 410-799-1830</p>	<p>AGENCY RECORDS INVENTORY</p> <p>PAGE <u>11</u> OF <u>20</u></p>
<p>1. Department/Agency Central Services/Risk Management</p>	<p>2. Division Safety</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 Safety B. Inspections, Complaints and investigation Files <u>7B</u></p>	<p>5. Earliest Year/Latest Year <u>2013 to 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.) Files contain case history of safety inspections and investigations conducted as well as complaints handled.</p>		
<p>7. Record Series Format(s) List all</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"/> Audio Tape <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Bound Book <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 <u>4</u> Number</p> <p><input checked="" 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>10. Annual Accumulation <u>1</u> Number</p> <p><input checked="" 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 checked="" type="checkbox"/> Monthly <input type="checkbox"/> Annually</p>	<p>12. File Becomes Inactive After <u>3</u> Number <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)</p>	
<p>13. Current Location(s) (Bldg., Floor, Room) 2680 Riva Road, 3rd Floor</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 (If Yes, cite Law(s) & Regulation(s)) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>16. Audit Requirements <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 requirements <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>18. Recommended Retention Retain for three (3) years, then screen annually and destroy any material no longer needed for current business.</p>	
<p>19. Name and Title of Preparer Helen Cosner, OSA II</p>	<p>20. Telephone Number 410-222-7630</p>	<p>21. Date 7/20/17</p>

<p>Instructions -Type or Print a separate form for each new or revised record series. Forward with Records Retention Schedule (DGS 550-1)</p>	<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 Waterloo Road, P.O. Box 275 Jessup, Maryland 20794 410-799-1930</p>	<p>AGENCY RECORDS INVENTORY</p> <p>PAGE <u>12</u> OF <u>20</u></p>
<p>1. Department/Agency Central Services/Risk Management</p>	<p>2. Division Safety</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 Safety <u>TC</u> C. Hazardous and Toxic Substances Files (Maryland Occupational Safety and Health - MOSH)</p>	<p>5. Earliest Year/Latest Year 1977 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.) Files contain information concerning manufacturers Safety Data Sheets (SDS), employers generated chemical lists with SDS attached and information distributed to employees to make them aware of where chemicals are used and protection to be used when working with these chemicals.</p>		
<p>7. Record Series Format(s) List all</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"/> Audio Tape <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Bound Book <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 <u>4</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> <hr/> <p>10. Annual Accumulation <u>1</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>Folder</u></p>
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Annually</p>	<p>12. File Becomes Inactive After <u>40</u> Number <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)</p>	
<p>13. Current Location(s) (Bldg., Floor, Room) 2660 Riva Road, 3rd Floor</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 (If Yes, cite Law(s) & Regulation(s)) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>16. Audit Requirements <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 requirements <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>18. Recommended Retention Retain for forty (40) years then destroy.</p>	
<p>19. Name and Title of Preparer Helen Cosner, OSA II</p>	<p>20. Telephone Number 410-222-7630</p>	<p>21. Date 7/20/17</p>

<p>Instructions -Type or Print a separate form for each new or revised record series. Forward with Records Retention Schedule (DGS 550-1)</p>	<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 Waterloo Road, P.O. Box 275 Jessup, Maryland 20794 410-789-1830</p>	<p>AGENCY RECORDS INVENTORY</p> <p>PAGE <u>13</u> OF <u>20</u></p>
<p>1. Department/Agency Central Services/Risk Management</p>	<p>2. Division Safety</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 Safety <u>7D</u> D. Occupational Safety and Health Administration (OSHA)</p>		<p>5. Earliest Year/Latest Year 2012 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.) Files contain information on Safety Violations, personal injury, and general safety for Bureau of Labor Statistics (State and Federal agencies)</p>		
<p>7. Record Series Format(s) List all</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"/> Audio Tape <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Bound Book <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 <u>6</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>10. Annual Accumulation <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 type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Annually</p>	<p>12. File Becomes Inactive After <u>5</u> Number <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)</p>	
<p>13. Current Location(s) (Bldg., Floor, Room) 2680 Riva Road, 3rd Floor</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 (If Yes, cite Law(s) & Regulation(s)) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>16. Audit Requirements <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 requirements <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>18. Recommended Retention Retain for five (5) years then destroy</p>	
<p>19. Name and Title of Preparer Helen Cosner, OSA II</p>	<p>20. Telephone Number 410-222-7630</p>	<p>21. Date 7/20/17</p>

<p>Instructions –Type or Print a separate form for each new or revised record series. Forward with Records Retention Schedule (DGS 550-1)</p>	<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 Waterloo Road, P.O. Box 275 Jessup, Maryland 20794 410-789-1930</p>	<p>AGENCY RECORDS INVENTORY</p> <p>PAGE <u>14</u> OF <u>20</u></p>
<p>1. Department/Agency Central Services/Risk Management</p>	<p>2. Division Safety</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 Safety <u>7E</u> E. Maryland Occupational Safety Health (MOSH)</p>	<p>5. Earliest Year/Latest Year 2013 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.) Files contain information on safety violations, personal injury, and general safety for Bureau of Labor Statistics (State and Federal agencies)</p>		
<p>7. Record Series Format(s) List all</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"/> Audio Tape <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Bound Book <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 <u>4</u> Number</p> <p><input checked="" 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>10. Annual Accumulation <u>1</u> Number</p> <p><input checked="" 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 <input checked="" type="checkbox"/> Annually</p>	<p>12. File Becomes Inactive After <u>2</u> Number <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)</p>	
<p>13. Current Location(s) (Bldg., Floor, Room) 2680 Riva Road, 3rd Floor</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 (If Yes, cite Law(s) & Regulation(s)) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>16. Audit Requirements <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 requirements <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>18. Recommended Retention Retain for three (3) years then destroy</p>	
<p>19. Name and Title of Preparer Helen Cosner, OSA II</p>	<p>20. Telephone Number 410-222-7630</p>	<p>21. Date 7/20/17</p>

<p>Instructions - Type or Print a separate form for each new or revised record series. Forward with Records Retention Schedule (DGS 550-1)</p>	<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 Waterloo Road, P.O. Box 275 Jessup, Maryland 20794 410-789-1830</p>	<p>AGENCY RECORDS INVENTORY</p> <p>PAGE <u>15</u> OF <u>20</u></p>
<p>1. Department/Agency Central Services/Risk Management</p>	<p>2. Division Safety</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 Safety F. Training Files <u>7F</u></p>	<p>5. Earliest Year/Latest Year 1977 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.) Files contain attendance records, course descriptions and dates given.</p>		
<p>7. Record Series Format(s) List all</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"/> Audio Tape <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Bound Book <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 <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>10. Annual Accumulation <u>1</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>Folder</u></p>
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Annually</p>	<p>12. File Becomes Inactive After <u>1</u> Number <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)</p>	
<p>13. Current Location(s) (Bldg., Floor, Room) 2660 Riva Road, 3rd Floor</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 (If Yes, cite Law(s) & Regulation(s)) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>16. Audit Requirements <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 requirements <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>18. Recommended Retention Screen lesson plans and attendance records annually. Destroy material no longer needed for current business. 3 years from class date then destroy.</p>	
<p>19. Name and Title of Preparer Helen Cosner, OSA II</p>	<p>20. Telephone Number 410-222-7630</p>	<p>21. Date 7/20/17</p>

INSTRUCTIONS – Type or print a separate form for each new/revise electronic record series. Forward with Records Retention Schedule (DGS 550-1) COMAR 14.18.02		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 Waterloo Road, P.O. Box 275 Jessup, Maryland 20794 (410) 799-1930		ELECTRONIC RECORDS INVENTORY Page 16 of 20	
1 DEPARTMENT/AGENCY Central Services/ Risk Management		2 DIVISION Insurance		3 UNIT	
DEFINITION – Record Series - A group of related records stored electronically and used as a unit for reference as well as retention and disposition purposes					
4 ELECTRONIC RECORD SERIES TITLE 8A 8A Self Insurance Fund Committee				5 EARLIEST YEAR/LATEST YEAR 1977 TO Present	
6 INPUT - Identify source of information to be entered Agendas, committee meetings minutes, and correspondence.			7 OUTPUT - Identify the use/s of information generated by system Supports legal and policy directives.		
8 ELECTRONIC RECORD SERIES DESCRIPTION - Briefly describe the information/documents/forms contained in a series. Include purpose and function of the system. Self Insurance Fund Committee agenda, committee meetings minutes, and correspondence supporting legal and policy directives of the committee.					
9 POLICY ON ACCESS AND USE – Explain or attach copy if established in writing. Accessed by Risk Management personnel					
10 UPDATING CYCLES OR CONDITIONS AND RULES FOR REVISING INFORMATION IN THE SYSTEM Update as needed.					
11 SPECIFY THE LOCATION AND MEDIA OF THE MAIN ELECTRONIC DATA FILE. Explain the progression established to ensure the record's retention and usability throughout the record's authorized life cycle. Stored on network J:/ Drive					
12 RECOMMENDED RETENTION Permanent. Retain for 50 years, then transfer to the Maryland States Archives for permanent retention. If scanned, scan paper in accordance with Maryland State Archives standards, destroy paper and transfer images to the Maryland State Archives.					
13 TYPED OR PRINTED NAME OF PREPARER Nicole Liening		14 TELEPHONE NUMBER 410-222-1591		15 DATE 7/22/2019	
16 TITLE OF PREPARER Safety & Insurance Manager					
DGS 550-6 (rev. 10/12)					

Instructions –Type or Print a separate form for each new or revised record series. Forward with Records Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 Waterloo Road, P.O. Box 275 Jessup, Maryland 20794 410-798-1930		AGENCY RECORDS INVENTORY 17 20 PAGE _____ OF _____	
1. Department/Agency Central Services/ Risk Management		2. Division Safety		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 Safety F. Training Files			5. Earliest Year/Latest Year ___1977___ to ___Present___		
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) Files contain attendance records, course descriptions and dates given					
7. Record Series Format(s) List all <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Audio Tape <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Bound Book <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 _1_ 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 _1_ 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) _Folder_	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Annually			12. File Becomes Inactive After _1_ Number <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)		
13. Current Location(s) (Bldg., Floor, Room) 2660 Riva Road, 3 rd Floor			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 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 requirements <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			18. Recommended Retention Retain for three (3) years from class date.		
19. Name and Title of Preparer Nicole Liening		20. Telephone Number 410-222-1591		21. Date 4/10/19	

Instructions - Type or Print a separate form for each new or revised record series. Forward with Records Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 Waterloo Road, P.O. Box 275 Jessup, Maryland 20794 410-789-1930		AGENCY RECORDS INVENTORY PAGE <u>16</u> OF <u>20</u>	
1. Department/Agency Central Services/Risk Management		2. Division Insurance		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 Self Insurance Fund				5. Earliest Year/Latest Year 2010 to Present	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series Records related to the self-insuring functions of the division under the following titles. C. General Liability Files 8C					
7. Record Series Format(s) List all <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Audio Tape <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Bound Book <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 <u>2</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) High Density Rolling File System	
		10. Annual Accumulation 200 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) Folders			
11. File is Used <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annually			12. File Becomes Inactive After <u>5</u> Number <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)		
13. Current Location(s) (Bldg., Floor, Room) 2680 Riva Road, 3rd Floor			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 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 requirements <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			18. Recommended Retention Open & Active - Retain until file can be placed in closed files. If minor, retain for five (5) years past 18th birthday. Closed - Retain for five (5) years then destroy.		
19. Name and Title of Preparer Helen Cosner, OSA II		20. Telephone Number 410-222-7630		21. Date 7/20/17	

<p><u>Instructions</u> –Type or Print a separate form for each new or revised record series. Forward with Records Retention Schedule (DGS 550-1)</p>	<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 Waterloo Road, P.O. Box 275 Jessup, Maryland 20794 410-789-1830</p>	<p>AGENCY RECORDS INVENTORY</p> <p>PAGE <u>19</u> OF <u>20</u></p>
<p>1. Department/Agency Central Services/Risk Management</p>	<p>2. Division Insurance</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 Self Insurance Fund 8D</p>	<p>5. Earliest Year/Latest Year 2010 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 Records related to the self-insuring functions of the division under the following titles. D. Automobile Liability and Comprehensive/Collision Files</p>		
<p>7. Record Series Format(s) List all</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"/> Audio Tape <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Bound Book <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 <u>2</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>High Density Rolling File System</u></p> <hr/> <p>10. Annual Accumulation <u>200</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>Folders</u></p>
<p>11. File is Used</p> <p><input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annually</p>	<p>12. File Becomes Inactive After <u>5</u> Number <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)</p>	
<p>13. Current Location(s) (Bldg., Floor, Room) 2660 Riva Road, 3rd Floor</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 (If Yes, cite Law(s) & Regulation(s)) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>16. Audit Requirements <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 requirements <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>18. Recommended Retention Open & Active – Retain until file can be placed in closed files. If minor, retain for five (5) years past 18th birthday. Closed – Retain for five (5) years after occurrence date then destroy.</p>	
<p>19. Name and Title of Preparer Helen Cosner, OSA II</p>	<p>20. Telephone Number 410-222-7630</p>	<p>21. Date 7/20/17</p>

<p>Instructions –Type or Print a separate form for each new or revised record series. Forward with Records Retention Schedule (DGS 550-1)</p>	<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 Waterloo Road, P.O. Box 275 Jessup, Maryland 20794 410-789-1830</p>	<p>AGENCY RECORDS INVENTORY</p> <p>PAGE <u>20</u> OF <u>20</u></p>
<p>1. Department/Agency Central Services/Risk Management</p>	<p>2. Division Insurance</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 Self Insurance Fund <u>8E</u></p>	<p>5. Earliest Year/Latest Year 2010 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 Records related to the self-insuring functions of the division under the following titles. E. Miscellaneous Claims – Contains claims against the County that are not contained in 7C & D.</p>		
<p>7. Record Series Format(s) List all</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"/> Audio Tape <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Bound Book <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 <u>1</u> 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) <u>High Density Rolling File System</u></p> <hr/> <p>10. Annual Accumulation <u>100</u> 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) <u>Folders</u></p>
<p>11. File is Used</p> <p><input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annually</p>	<p>12. File Becomes Inactive After <u>5</u> Number <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)</p>	
<p>13. Current Location(s) (Bldg., Floor, Room) 2660 Riva Road, 3rd Floor</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 (If Yes, cite Law(s) & Regulation(s)) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>16. Audit Requirements <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 requirements <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>18. Recommended Retention Maintain for five (5) years after occurrence date then destroy.</p>	
<p>19. Name and Title of Preparer Helen Cosner, OSA II</p>	<p>20. Telephone Number 410-222-7630</p>	<p>21. Date 7/20/17</p>