

State of Hawaii
 Department of Accounting and General Services
 Archives Division, Records Management Branch

RECORDS TRANSMITTAL AND SHELF LIST

From (Name of Dept.) (1)	Division and Branch (2)	Control Schedule No. (3)	Records Center Accession No. (4)
Restrictions on Use of Records (5)		Item No. (6)	Total No. of Containers (7)
Records Center Location (8)	Agency Box Numbers (9)	Description of Records (10)	Disposal Year (11)

Check one block only. (12)

Certify that records are free of "library beetles" or related insects.

Certify that records were fumigated on:
 and a copy of fumigation record is attached.

Records Officer: (13)	Records Custodian: (14)	Date: (15)
Records Received By: (16)	Title: (17)	Date: (18)