

**Donna ISD Records Department
Storage Transmittal Form**

Please prepare two (2) for each standard storage container (Bankers Box) to be sent.
One must be placed inside the box and the other must be sent to Records Department.

Department/Office/School: _____

Box Number: _____ of _____

Retention Year: _____

TSL Item #: _____

List of Contents (Include Years of Content):

Destruction Date: _____

Sender's Signature: _____ Date: _____

To be completed at Record Retention Dept.

Box Number Assigned: _____

Received at Records Dept.

Date: _____ Assigned by: _____

Note: Please file this in your records.

When requesting a box/document you will need to provide the assigned number to the box.