



Records Destruction Inventory

Division: _____ Department: _____ Bldg/Room: _____

Prepared by: _____ Email: _____ Phone: _____

Record Category	Record Series	Records Description	Date Span		Format (Paper, Electronic, CD, DVD, Tape)	Volume		Destroyed By (Shred, Erase or Trash)
			Start mm/yyyy	End mm/yyyy				

Destruction Date: _____

Records Destroyed by: _____ Date: _____