CERTIFICATE OF RECORDS DISPOSITION FOR INFORMATION SYSTEMS RECORDS – STATE AGENCIES



STATE OF CONNECTICUT Connecticut State Library Office of the Public Records Administrator

231 Capitol Avenue, Hartford, CT 06106 https://ctstatelibrary.org/publicrecords

DATE SIGNED:

DATE SIGNED:

Form RC-109 (Revised 07/2023)

AUTHORITY: State agencies in the Executive branch and certain quasi-public agencies must use this form to obtain approval for disposition of public records listed on the *State Agencies' Records Schedule INFOSYS: Information Systems Records* and in accordance with CGS §11-8a. Note that for all other records series, the agency must submit a *Records Disposition Authorization* (Form RC-108) for approval prior to disposition. All records proposed for disposition must be on an approved records retention schedule. If a record is not on a schedule, the record cannot be destroyed; contact this office for further direction.

INSTRUCTIONS:

STATE ARCHIVIST:

PUBLIC RECORDS ADMINISTRATOR:

- 1. Fill out the form completely and legibly and email form to CSL.Disposition@ct.gov
- 2. Submit it to this office **by December 15**th of the current year for the next calendar year (e.g., submit by December 15, 2023 for calendar year 2024).
- 3. The form must be signed by the Information Technology Manager or Designated IT Employee and the Records Management Liaison Officer (RMLO).
- 4. After approval by the State Archivist and the Public Records Administrator, a copy of the approved Certificate will be returned to the RMLO, as indicated below. Records may not be destroyed until the agency has received the signed Certificate.

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AGENCY:	DIVISION/UNIT:	DIVISION/UNIT:		
RMLO E-MAIL (for return of form):	RMLO PHONE:			
CERTIFICATE OF COMPLIANCE				
I hereby certify that for the period between January 1, to December 31,, this agency will meet the retention and disposition requirements as indicated on the <i>State Agencies' Records Schedule INFOSYS: Information Systems Records</i> issued by the Office of the Public Records Administrator and denoted as "Destroy in agreement with Certificate of Records Disposition for Information Systems Records (Form RC-109)." No records, in m opinion, pertaining to any pending case, claim, or action will be destroyed.				
INFORMATION TECHNOLOGY MANAGER OR DESIGNATED IT EMPLOYEE:		JOB TITLE:		
INFORMATION TECHNOLOGY MANAGER OR DESIGNATED IT EMPLOYEE SIGNATURE:		DATE SIGNED:	PHONE:	
RMLO:		JOB TITLE:		
RMLO SIGNATURE:		DATE SIGNED:	PHONE:	
CERTIFICATE REVIEW	OFFICE USE ONLY – Reason for Deni	DNLY – Reason for Denial (if applicable):		
☐ APPROVED ☐ DENIED				

STATE ARCHIVIST SIGNATURE:

PUBLIC RECORDS ADMINISTRATOR SIGNATURE: