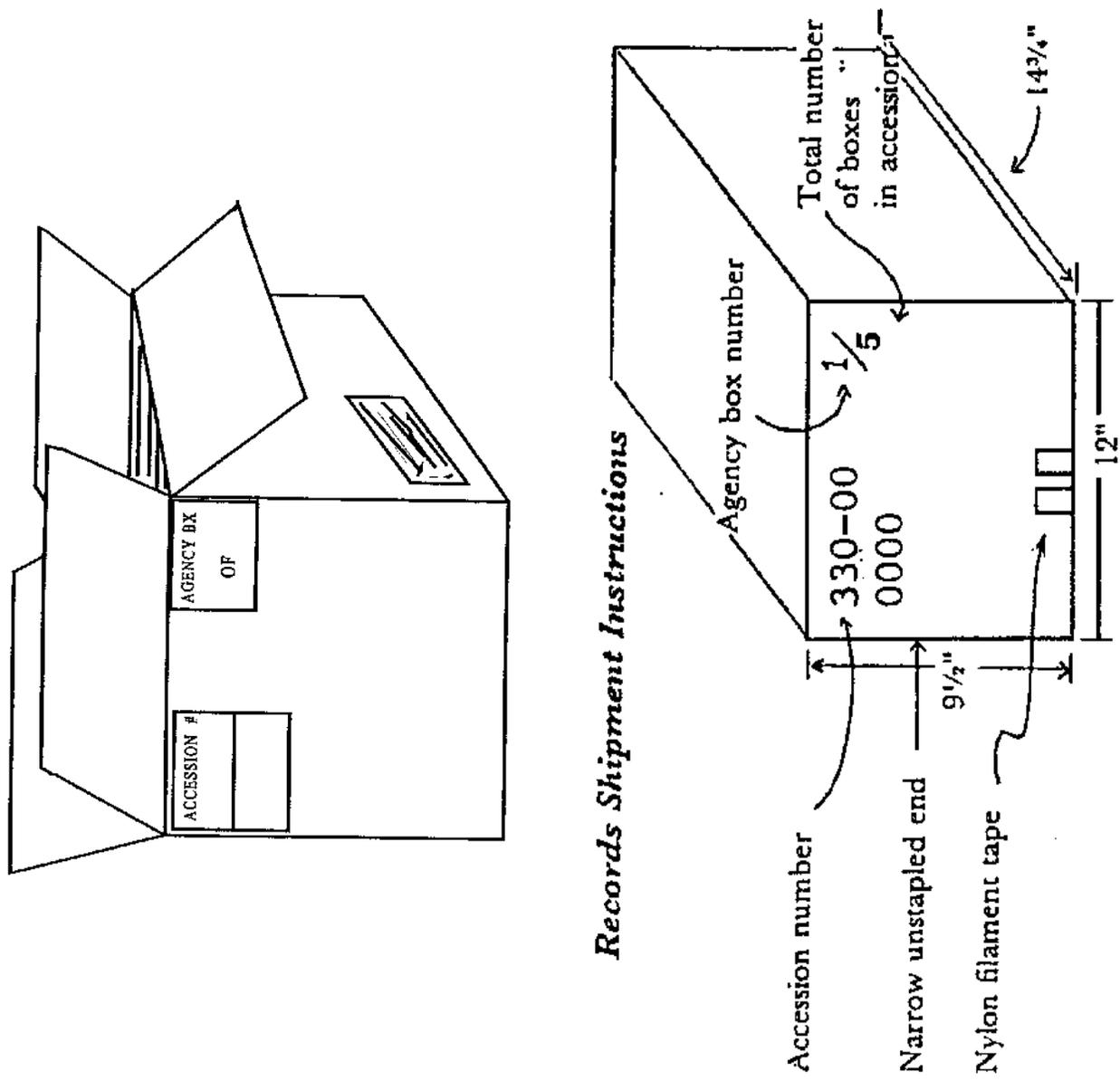


FIGURES

FIGURE 2-A-1 MARKING AND PACKING INSTRUCTIONS



**FIGURE 2-A-2 RECORDS TRANSMITTAL AND RECEIPT, SF FORM 135**

<b>RECORDS TRANSMITTAL AND RECEIPT</b>			Complete and send original and two copies of this form to the appropriate Federal Records Center for approval prior to shipment of records. See specific instructions on reverse.				PAGE 1	OF PAGES				
1. TO <i>(Complete the address for the records center serving your area as shown in 36 CFR 1228.150.)</i>			5. FROM <i>(Enter the name and complete mailing address of the office retiring records. The signed receipt of this form will be sent to this address.)</i>									
<b>Federal Records Center</b>												
2. AGENCY TRANSFER AUTHORIZATION	TRANSFERRING AGENCY OFFICIAL <i>(Signature and title)</i>			DATE								
3. AGENCY CONTACT	TRANSFERRING AGENCY LIAISON OFFICIAL <i>(Name, office and telephone No.)</i>											
4. RECORDS CENTER RECEIPT	RECORDS RECEIVED BY <i>(Signature and title)</i>			DATE								
<i>Fold Line</i>												
<b>6. RECORDS DATA</b>												
ACCESSION NUMBER			VOLUME <i>(cu. ft.)</i>	AGENCY BOX NUMBERS	SERIES DESCRIPTION <i>(With inclusive dates of records)</i>	RESTRICTION	DISPOSAL AUTHORITY <i>(Schedule and item number)</i>	DISPOSAL DATE	COMPLETED BY RECORDS CENTER			
RG	FY	NUMBER							LOCATION	SHELF PLAN	CONT. TYPE	AUTO. DISP.
<i>(a)</i>	<i>(b)</i>	<i>(c)</i>	<i>(d)</i>	<i>(e)</i>	<i>(f)</i>	<i>(g)</i>	<i>(h)</i>	<i>(i)</i>	<i>(j)</i>	<i>(k)</i>	<i>(l)</i>	<i>(m)</i>
330						W						

Standard Form 135 (Rev. 7-85) (EG)  
Prescribed by NARA  
36 CFR 1228-152  
*(PerFORM PRO)*

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**FIGURE 2-A-2 RECORDS TRANSMITTAL AND RECEIPT, SF FORM 135 (CONTINUED)**

**INSTRUCTION FOR COMPLETION OF STANDARD FORM 135**

**FOR COMPLETION BY THE TRANSFERRING AGENCY**

Items 1, 2, 3 and 5 are self-explanatory. Specific instructions for item 6 are as follows:

Col.

*Accession Number.* A separate accession number is required for each series of records listed on the form. A series consists of records having the same disposal authority and disposal date that are transferred together to the records center. The accession number is entered in three parts, consisting of:

- (a) The NARA record group number assigned to the records of the agency making the transfer;
- (b) The last two digits of the current fiscal year; and
- (c) The four digit sequential number obtained in advance from the records center. (Arrangements may be made with the center to have these numbers assigned by the agency records officer or other official.)
- (d) *Volume.* Enter the volume in cubic feet of each series of records being transferred.
- (e) *Agency Box Numbers.* Show the inclusive box numbers for each series of records being transferred. the agency shall number each carton sequentially as follows: 1 of 25, 2 of 25, 3 of 25, etc. (Each new series of records should begin with carton number 1.) to facilitate control of the records and future reference service, the agency also shall mark each container with the assigned accession number prior to shipment.
- (f) *Series Description.* Describe the records insufficient detail to allow the records center to check for proper application of the disposal schedule. Inclusive dates of the records should be indicated. Show the organizational component that created the records when it is other than that shown in item 5.
- (g) *Restriction.* Enter one of the following codes to show a restriction on use of the records. Restrictions other than (or in addition to) security classifications, such as limiting access certain agency officials, are to be specified by a statement in the Series Description column (f).

<i>Code</i>	<i>Restrictions</i>
Q	Q security classification
T	Top Secret security classification
S	Secret security classification
C	Confidential security classification
R	Restricted use--witnessed disposal <i>not required</i> (specify in column (f))
W	Restricted use--witnessed disposal <i>required</i> (specify in column (f))
N	No restrictions

- (h) *Disposal Authority.* For each series of records, cite the agency schedule and specific item number authorizing disposal. Cite the NARA disposal job and item number if it has not been incorporated into an updated agency schedule.
- (i) *Disposal Date.* Applying the disposal authority previously cited in column (h), enter the month and year in which the records may be destroyed.

**FOR COMPLETION BY THE RECORDS CENTER**

Item 4 is self-explanatory. Specific instructions for item 6 are as follows:

Col.

- (j) *Location.* The records center annotates the shelf location of the first carton for each series of records.
- (k) *Shelving Plan.* The records center enters the appropriate code from Chap. 7-10e, HB, Records Center Operations (NAR P 1864.1A), to reflect the shelving system.
- (l) *Container Type.* The records center enters the appropriate code from Chap. 7-10h, NAR P 1864.1A, to reflect the type of container in which the records are retired.
- (m) *Automatic Disposal.* The records center enters either Y (yes) to indicate automatic disposal applies or N (no) indicating that the agency wishes to receive disposal concurrence notice prior to destruction of the records. Automatic disposal is applied only when previously agreed upon by the agency.

Use Standard Form 135-A, Records Transmittal and Receipt Continuation, when additional space is required for listing records data.

☆U.S. Government Printing Office: 1990-262-081/20124

**FIGURE 2-A-3 RECORDS TRANSMITTAL AND RECEIPT (CONTINUATION) - SF FORM 135A**

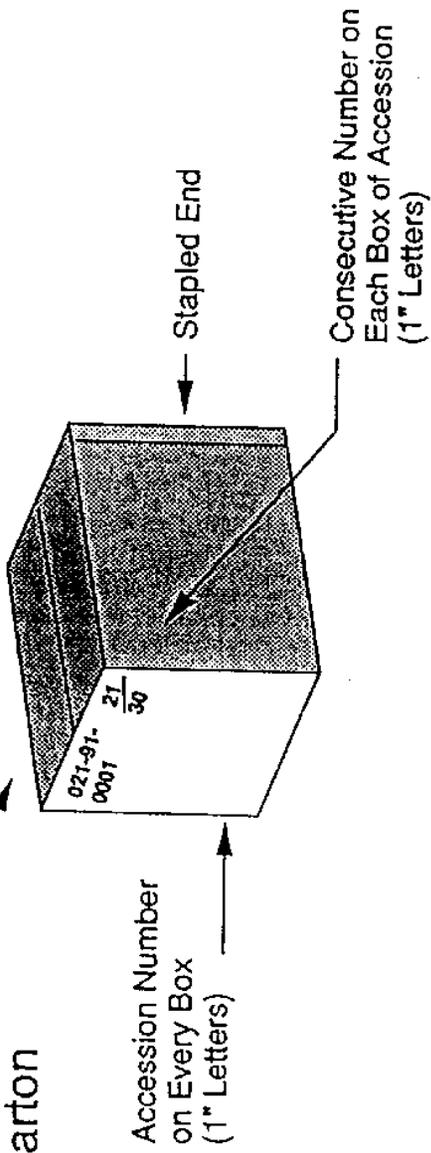
RECORDS TRANSMITTAL AND RECEIPT (Continuation)			This form is to continue listing of Records Data when space on SF 135 is not adequate. Instructions for completion of SF 135 apply.		TRANSFERRING AGENCY'S NAME		DATE	PAGE	OF PAGES			
ACCESSION NUMBER			VOLUME (cu. ft.)	AGENCY BOX NUMBERS	SERIES DESCRIPTION (With inclusive dates of records)	RESTRICTION	DISPOSAL AUTHORITY (Schedule and Item number)	DISPOSAL DATE	COMPLETED BY RECORDS CENTER			
RG	FY	NUMBER							LOCATION	SHELF PLAN	CONT. TYPE	AUTO. DISP.
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(l)	(m)

**FIGURE 2-A-4 REFERENCE REQUEST - FEDERAL RECORDS CENTER, OF FORM 11**

<b>REFERENCE REQUEST-FEDERAL RECORDS CENTER</b>		<b>NOTE: Use a separate form for each request.</b>	
<b>SECTION I-TO BE COMPLETED BY REQUESTING AGENCY</b>			
ACCESSION NO.	AGENCY BOX NUMBER	RECORDS CENTER LOCATION NUMBER	
DESCRIPTION OF RECORD(S) OR INFORMATION REQUESTED		OF	
<input type="checkbox"/> BOX			
<input type="checkbox"/> FOLDER (include file number and title)			
REMARKS			
<b>SECTION II-FOR USE BY RECORDS CENTER</b>			
<input type="checkbox"/> NATURE OF SERVICE FURNISH COPY OF RECORDS	<input type="checkbox"/> PERMANENT WITHDRAWAL	<input type="checkbox"/> TEMPORARY LOAN OF RECORD(S)	<input type="checkbox"/> REVIEW <input type="checkbox"/> OTHER (Specify)
<input type="checkbox"/> RECORDS NOT IN CENTER CUSTODY <input type="checkbox"/> RECORDS DESTROYED			
<input type="checkbox"/> WRONG ACCESSION NUMBER-PLEASE RECHECK			
<input type="checkbox"/> WRONG BOX NUMBER-PLEASE RECHECK			
<input type="checkbox"/> WRONG CENTER LOCATION-PLEASE RECHECK			
<input type="checkbox"/> ADDITIONAL INFORMATION REQUIRED TO IDENTIFY RECORDS REQUESTED			
<input type="checkbox"/> MISSING (Neither record(s), information nor charge card found in container(s) specified)			
<input type="checkbox"/> RECORDS PREVIOUSLY CHARGED OUT TO (Name, agency and date):			
<b>SECTION III-TO BE COMPLETED BY REQUESTING AGENCY</b>			
NAME OF REQUESTER	TELEPHONE NO.	FTS	DATE
		<b>RECEIPT OF RECORDS</b>	
NAME AND ADDRESS OF AGENCY (Include street address, building, room no. and Zip code)		Requester please sign, date and return this form, for file item(s) listed above, ONLY if the block to right has been checked by the Records Center	<input type="checkbox"/>
		SIGNATURE	DATE
NSN 7540-00-682-6423 5011-108		PREVIOUS EDITION USABLE	
		OPTIONAL FORM 11 (Rev. 7-87) NATIONAL ARCHIVES AND RECORDS ADMINISTRATION 36 CFR 1228.162	

FIGURE 2-A-5 ARRANGEMENT OF BOXES ON PALLETS

### Standard FRC Cubic Foot Carton



### Palletizing Your Records Alternate Each Layer (Maximum - 6' High)

