CERTIFICATE OF RECORDS DESTRUCTION

This form documents the destruction of public records in accordance with Alaska Statute 40.25,

1. Agency/Locality	2. Division/Department	3. Person Completing Form
City of Gustavus	Desk of the City Clerk	Karen Platt CMC, City Clerk
4. Address, City, State & Zip	5a. Telephone Number	5b. E-mail Address
P.O. Box 1, Gustavus, AK 99826	907-697-2451	
		clerk@gustavus-ak.gov

6. Records to Be Destroyed

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a) Schedule and Records Series Number	b) Records Series Title	c) Date Range (mo/yr)	d) Location	e) Volume	f) Destruction Method	
E-4, 3yrs	Reading Files	2006-08	CH	19 docs	Recycle	
A-4, 4yrs	Accounts Rec'/Payable	2005, 2007, 2008, 2015-18	СН	6 file folders	Recycle	
PW-1, 4yrs	Procurement	2010	СН	8 docs	Recycle	
A-17, 10yrs	Accounting – Grants	2004-05, 2010-11	СН	6 file folders	Recycle	

DESTRUCTION APPROVALS

Note: Public records may not be destroyed without receiving prior authorization from the Mayor and/or City Council.

We certify that the records listed above have been retained for the scheduled retention period, as per the City of Gustavus Records Retention Schedule, required audits have been completed, and no pending or ongoing litigation or investigation involving these records is known to exist.

7. MAYOR	DATE
	
Q CITY CI FDK/TDFACIIDFD	DATE

9. RECORDS DESTRUCTION

AFFIRMED BY:	DATE