

Request for Records Disposal or Transfer Authorization

RM60

ENTITY: Roosevelt County Justice Court	PHONE: Post # 2	E-MAIL: penny.hendrickson@mt.gov
CONTACT: Judge Penny Hendrickson	406-787-6607	DISPOSAL NUMBER:
ADDRESS: Box 421 Culbertson 59218		

E-MAIL COMPLETED FORM TO: SOSLocalGovtRecCom@mt.gov OR Mail to the Local Government Records Committee, c/o Department of Administration-Local Government Services, P.O. Box 200547, Helena, MT 59620-0547

***Confidential:** The local government entity must determine if records are confidential or sensitive and mark accordingly.

Schedule #	Item #	Page #	Description of Records (Include description from schedule along with the case # or other identifying information pertinent to your office)	Inclusive Dates		* Confidential	10 Year Rule	Disposal Approval (Committee only)		Agency Comments	Audit History or Committee Comments
				MONTH AND YEAR				Yes	No		
				From	To						
4	4		Example: Bank Statements	10/2001	10/2002		X	X			
8	32	MR13	Example: Commission Records-Minutes	01/1950	10/1990		X	X		Microfilmed	
12	41e		Example: Marriage Licenses	08/1907	09/1972		X		X		
10	2.1a	7	Audit Reports	2012	2017	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Retain for Audit + 7 years	
10	2.1b	7	Bank Statements	2012	2017	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Retain for Audit + 7 years	
10	2.1c	7	Bank Dep. Slips	2012	2017	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Retain for Audit + 7 years	
10	2.1d	7	Used Checkbook	2012	2017	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Retain for Audit + 7 years	
10	2.1f	7	cash Receipts	2012	2017	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Retain for Audit + 7 years	
10	2.1j	7	Bank Reconciliation	2012	2017	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Retain for Audit + 7 years	
10	2.1n	7	Used Receipts	2012	2017	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Retain for Audit + 7 years	
10	4.1a	7	Closed Civil Cases	2010	2011	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Retain 10 years from dismissal or date final judgment becomes unenforceable.	
10	4.1b	7	Orders of Protection	2010	2011	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Retain 10 years from denial, dismissal or date order expires.	
10	4.3a	7	Closed Small Claims	2010	2011	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Retain 10 years from dismissal or date when final judgment becomes unenforceable.	
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

In accordance with 2-6-1202, 7-5-2132, 7-5-4124 and 20-1-212 and upon the order of the governing body, we the undersigned affirm the records listed on this disposal request are not subject to any litigation, legal or regulatory hold, and any financial records listed have been audited. See Notification on Central Registry (Ten Year Rule) below. Typed name below is acceptable as the signature.

Authorized Local Government Representative: Name: Penny Hendrickson Title: Judge	Date: 12-1-22	Phone: 406-787-6607
Records Custodian: Name: Peggy Purvis Title: Clerk	Date: 12-7-22	Phone: 406-787-6607

LOCAL GOVERNMENT SUBCOMMITTEE SIGNATURES REQUIRED FOR DISPOSAL APPROVAL

Department of Administration Committee Member: Name: Daniel Bradford O'Brien Signature: <i>Daniel Bradford O'Brien</i>	Date: 12/6/2022
Montana Historical Society Committee Member: Name: Richard R. Aarstad Signature: <i>Richard R. Aarstad</i>	Date: 12/07/2022
Local Government Committee Member: Name: Paige Trautwein Signature: <i>Paige Trautwein</i>	Date: 12/06/2022

NOTIFICATION ON CENTRAL REGISTRY

Per MCA 2-6-1205, public records listed on this form that more than ten (10) years old and are approved for disposal may not be destroyed until they have been listed on a central registry and offered to various agencies and the public for 60 days.

Request for Records Disposal or Transfer Authorization have been listed on the central registry. Completed by Name: Andy Ritter Signature: <i>Andy Ritter</i>	Unclaimed records may be disposed 60 days after this date: 12/12/2022
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TEN YEAR RULE:
Public records more than ten (10) years old approved for destruction may not be destroyed for 60 days after the date listed on the central registry.

Certificate of Transfer/Destruction/Disposition Comments

I hereby attest that I have destroyed, transferred or retained records as designated by the Local Government Subcommittee. If transferred, I have noted in the "Comments" field above, the entity to which the records have been relocated.

Name: Signature:	Title:	Date:
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