

Fax to # _____ Attn: _____

InterMountain Record Center, Inc.

3765 Airport Parkway, Casper, WY 82644/P.O. Box 2770, Mills, WY 82644 PH:307-265-9553 Fax: 307-237-8225

STORAGE MICROFILM SCANNING DESTRUCTION

AUTHORIZATION FOR DESTRUCTION

This document shall serve as written authorization for the following records to be shredded by INTERMOUNTAIN RECORD CENTER'S commercial shredding service, a department of IRC providing confidential destruction of business documents.

*Note: Please include category and dates of records

This authorization for confidential destruction at the agreed upon rate being granted

by: _____ <=

SIGNATURE

an authorized agent of: _____ <=

COMPANY NAME

in my official capacity as: _____ <=

POSITION/TITLE

on this date: _____ <=

DATE

These records shall be stored in INTERMOUNTAIN RECORD CENTER'S secure facility until destruction. No records shall leave IRC's facility unless properly destroyed according to federal regulations as set forth in the Fair and Accurate Credit Reporting Act 16 CFR Part 682

BILLING INFORMATION

Clean of Hardware? YES – Rate = \$.24/lb NO - Prep = \$._____/lb effective 1/1/12(____)

Weight _____ Date of Destruction _____ Technician: _____

CERTIFICATE OF DESTRUCTION

I, hereby, certify that the above listed records have been shredded according to specifications:

Certification of Destruction: _____

OPERATOR SIGNATURE

Please sign areas marked by <= & return by FAX to 237-8225. Thank you!