

<b>REQUEST FOR RECORDS DISPOSITION AUTHORITY</b>		JOB NUMBER <i>NI-065-08-19</i>	
To: NATIONAL ARCHIVES & RECORDS ADMINISTRATION 8601 ADELPHI ROAD COLLEGE PARK, MD 20740-6001		Date received <i>6/18/08</i>	
1 FROM (Agency or establishment) <b>DEPARTMENT OF JUSTICE</b>		NOTIFICATION TO AGENCY  In accordance with the provisions of 44 U.S.C. 3303a, the disposition request, including amendments, is approved except for items that may be marked "disposition not approved" or "withdrawn" in column 10	
2 MAJOR SUBDIVISION <b>FEDERAL BUREAU OF INVESTIGATION</b>			
3 MINOR SUBDIVISION <b>HUMAN RESOURCES DIVISION</b>			
4. NAME OF PERSON WITH WHOM TO CONFER <b>Teresa C. Sharkey, CRM</b>	5 TELEPHONE NUMBER <b>202-324-1613</b>	DATE <i>8-28-08</i>	ARCHIVIST OF THE UNITED STATES <i>Adrienne C. Thomas</i>
6 AGENCY CERTIFICATION I hereby certify that I am authorized to act for this agency in matters pertaining to the disposition of its records and that the records proposed for disposal on the attached <u>  1  </u> page(s) are not needed now for the business for this agency or will not be needed after the retention periods specified, and that written concurrence from the General Accounting Office, under the provisions of Title 8 of the GAO Manual for Guidance of Federal Agencies,  <input checked="" type="checkbox"/> is not required <input type="checkbox"/> is attached, or <input type="checkbox"/> has been requested			
DATE <i>6/12/08</i>	SIGNATURE OF AGENCY REPRESENTATIVE <i>William L. Hooton</i>		TITLE ASSISTANT DIRECTOR
7 ITEM NO	8 DESCRIPTION OF ITEM AND PROPOSED DISPOSITION	9 GRS OR SUPERSEDED JOB CITATION	10 ACTION TAKEN (NARA USE ONLY)
	The attached page provides disposition instructions for records maintained by the Federal Bureau of Investigation's Health Care Programs Unit (HCPU)		

*All 9/8/08 copies sent to Agency, NUNMW/NK*

7 ITEM NO	8 DESCRIPTION OF ITEM AND PROPOSED DISPOSITION	9 GRS OR SUPERSEDED JOB CITATION	10 ACTION TAKEN (NARA USE ONLY)
1	<p><b>Individual health/medical records for non-FBI employees:</b> These records cover visits to the FBI's health care facilities by non-FBI employees, such as other government agency employees, contractors, and visitors. The records are arranged by year and individual's name, and they include completed medical forms, signed treatment consent forms, diagnostic notes, and related information.</p> <p>Disposition: TEMPORARY. Cut-off at the end of the calendar year. DESTROY when five years old.</p>		
2	<p><b>Medical equipment records:</b> These records relate to medical equipment used in the FBI's health care facilities by health care providers. The records include logs, checklists, inspection reports, machine calibration documentation, and inventory lists.</p> <p>Disposition: TEMPORARY. Cut-off at the end of the calendar year. DESTROY when three years old.</p>		