Print Form

RECORDS TRANSMITTAL AND RECEIPT

Complete and send original and two copies of this form to the appropriate Federal Records Center for approval prior to shipment of records.

1. TO *(Complete the address for the appropriate records center serving your area)*
WASHINGTON NATIONAL RECORDS CENTER
ACCESSION AND DISPOSAL BRANCH

As shown in FPMR 101-11.410-1 ▷ WASHINGTON, DC 20409

5. FROM *(Enter the name of complete mailing address of the office retiring the records. This signed receipt of this form will be sent to this address)*

COMMANDANT OF THE MARINE CORPS
HEADQUARTERS, U.S. MARINE CORPS (ARDB)
WASHINGTON, DC 20380-1775

2. AGENCY TRANSFER AUTHOR-ZATION	TRANSFERRING AGENCY OFFICIAL *(Signature and title)*	DATE
3. AGENCY CONTACT	TRANSFERRING AGENCY LIAISON OFFICIAL *(Name, office and telephone No.)*	
4. RECORDS CENTER RECEIPT	RECORDS RECEIVED BY *(Signature and title)*	DATE

Fold line

6. **RECORDS DATA**

ACCESSION NUMBER RG (a)	FY (b)	NUMBER (c)	VOLUME *(cu. ft.)* (d)	AGENCY BOX NUMBERS (e)	SERIES DESCRIPTION *(With inclusive dates of records)* (f)	RESTRIC-TION (g)	DISPOSAL AUTHORITY *(Schedule and item number)* (h)	DISPOSAL DATE (i)	COMPLETED BY RECORDS CENTER LOCATION (j)	SHELF PLAN (k)	CONT-TYPE (l)	AUTO-DISP (m)
	09	1			Publishing & Logistics Management Section (ARDE)		SECNAV M-5210.1M Part III, Chap 5, Para 5213.2.a, 1 yr.	Jan 2018				
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Standard Form 135 (Rev. 7-85)
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