

**CERTIFICATE OF DESTRUCTION OF RECORDS
for Community of Christ
Records Management**

The records described below were destroyed in the regular course of business in conformity with the Community of Christ's records management policies, record retention schedules, and standard operating procedures.

Department/Office _____

Person Completing Form _____

Title _____

Phone No. _____

Description of Records Destroyed
(Include Records Series Number, Title, and Description)

Dates Covered by Records _____

Date of Destruction _____

Method of Destruction

For Confidential records only:

- Burning Shredding Chemical Disintegration
 Demagnetizing Overwriting Pulverizing Other: _____

For all other records, please describe method of destruction:

By signing below, we attest that the records listed above were retained for the scheduled period of time and destroyed according to their schedule and that the records are not relevant for pending or ongoing litigation or investigations.

Records Coordinator/MCFO _____

Records Destroyed By _____

Signature

date

signature

date

Staple a copy of the corresponding records transfer form to this certificate. Keep this permanently in your office.