FORM SA-1 (10-71) SUBMIT IN TRIPLICATE

## STATE OF HAWAII RECORDS DISPOSITION AUTHORIZATION

State Archives
Iolani Palace Grounds, Honolulu, Hawaii 96813
Attention: State Archivist

<ol> <li>In compliance with Section 94-3 Hawaii Revised Statutes, as amended, I hereby request or otherwise dispose of the numbered record items listed below.</li> </ol>				Continuous authorization to destroy			
				Authorization YEARS OR PERIOD RETENTION			
ITEM NO.	FORM NO.		DESCRIPTION		FROM	THROUGH	RETENTION
				•	•		•
2. Record items	Nos			will be preserved on r	nicrofilm in accordance v	with Section 02 21 Heav	aii Pavisad Statutas
It is requested th	at Record item Nos			will be preserved on i	meronim in accordance v	with Section 92-31 Haw	an Revised Statutes
re is requested in	at Heesta Helli 1105	·					
3.							
SIGN	NATURE OF RECORDS (	DFFICER	AGENCY	,	SIG	GNATURE OF HEAD OF DEPA	RTMENT
				DATE			
4. I hereby certi	fy that the records a	s listed, unless exceptions are lis	ted below, do not appear to be of sur	fficient value for legal, administra	ative, or research purpose	es to warrant	
	ion. Exceptions: _						
Record items No	os						
		to be transferred to	State Archives				
	<u> </u>		Ħ				
			AGENCY			STATE ARCHIVIST	
				DATE	<u>:</u>		
5 Destruction of	r other disposal wit	th exceptions indicated,	Continuo	ous authorization			
	i onici disposai, wi	in exceptions indicated,	=				
approved.			Authoriza	ation			
				D.···			
COMPTROLLER				Date:_			