

STORAGE USE ONLY

Retention Period: _____ Destruction Date: _____

**NB Council****Forms Retention Envelope Label for use prior to SafeGuide 2008***Please securely affix this label with tape to the outside of an 8 1/2" x 11" envelope.*

Responsible Guider: _____ Date of Event/Activity: _____

Unit, district, area or province name _____

Unit, district, area or province iMIS number _____

Description of event/activity, or function of forms inside _____

Please indicate beside all appropriate form numbers which type of forms are contained in the envelope:

C.2a		OA.1		OA.5		WA.1		IT.4		A.3	
C.2b		OA.2a		RA.1		WA.2		IT.5		A.3R	
C.7a		OA.2b		INS.01		WA.3		IT.6		A.5	
C.7b		OA.3		INS.02		IT.2		IT.7		A.5R	
C.8		OA.4		INS.03		IT.3		IT.8		A.7	
										IR.1	
Other: _____											Revised November 2008

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