

ALABAMA DEPARTMENT OF ARCHIVES AND HISTORY

P.O. Box 300100, 624 Washington Avenue, Montgomery, Alabama 36130

TEMPORARY CUSTODY RECEIPT – STATE RECORDS

Temporary Custody Receipt Number: _____

State Agency Name: _____

Name of Person Authorized to Sign Transmittal: _____

Email: _____ Phone: _____

If Different, Name of Contact Person for Questions: _____

Email: _____ Phone: _____

The state records listed below are received for evaluation and pre-processing.

Description of records: _____

Number of items or number of boxes: _____

The Alabama Department of Archives and History will contact the agency for signature upon completion of an Archival Records Transmittal Form.

Received From: Printed Name

Contact Information

Received From: Signature

Date

ADAH Employee: Printed Name

Contact Information

ADAH Employee: Signature

Date