

4615 Mail Service Center, Raleigh NC 27699-4165

919-814-6900

State Agency Email Transfer (RC-2D-E)

AGENCY INFORMATIO	'N			
Agency:				
Division:				
Office/Branch/Unit:				
Agency Contact:				
Name	Phone	E-mail		
Additional Contacts:				
Name	Phone	E-mail		
Name	Phone	E-mail		
RECORDS SERIES INF	ORMATION			
For completion by Rec	cords Analyst (NOTE: There should b	pe a separate form	for each	account.)
Item Number:				
Series Title:				
Effective Date of				
Schedule:				
Disposition Instructions:				
	(99S) has been completed		□ Yes	□ No
Position Number:				
Email Account:				
Is this account currently If yes, explain:	involved in audit, litigation, or othe	er official action?	□Yes □	∃No



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SUBMISSION INFORMATION PACKAGE							
Creating entity (if different from agency information above):							
Inclusive dates of re	ecords being trans	sferred:					
For completion by Records Analyst: No records in this series dated after			_may be transferred.				
Record Format and Documentation: File Type (check all that apply):							
E-mail	☐ MBX	☐ EML ☐ T>	CT □ RTF	☐ PDF/A			
	☐ HTML	☐ MSG ☐ PS	ST				
Software used to create/access records:							
Preservation Issues (e.g., data dependencies, linked files/fields, files were normalized to another file format, encryption, compression, digital signatures, etc.): Special Instructions:							
Bag List and Description (See Bagger GUI User Guide at https://archives.ncdcr.gov/documents/bagger-gui-user-guide for instructions on creating and naming bags.)							
Physical Media	Bag Name	Number of Files	Total Size of Bag	File Formats			
Totals for the entire transfer:							



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Media used for transfer (choose one):
☐ hard drive ☐ flash drive ☐ FTP/Cloud
For all media except FTP, choose one:
☐ Agency-owned media: please return with electronic records intact
☐ Agency-owned media: please destroy electronic records and return media intact
☐ Agency-owned media: please destroy media and copies of records when transfer complete after filming or transfer to the Digital Repository
☐ Agency-owned media: please destroy media and retain copies of records permanently when transfer complete
☐ Media owned by Government Records
Date of Transfer:
Signature of Agency Representative:

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FOR INTERNAL USE ONLY

FOR TRANSFER TO DIGITAL REPOSITORY

	Unit	Name	Date		
Records received	RAU				
Bag list verified	RAU				
Records recorded in FAIDS	RSU				
Records accessioned	RDU				
Records validated	DSS				
Fixity check before quarantine					
Virus check before quarantine					
Fixity check after quarantine					
Virus check after quarantine					
Records accepted into digital	DSS				
repository					
Confirm records receipt with	RAU				
agency					
Copies of transfer:	RAU/DSS				
☐ Destroyed after filming					
Retained permanently	DALLIDOO				
Physical media disposition:	RAU/DSS				
□ returned					
□ destroyed					
Location of records in digital repository:					
Added to turnover file:					