



INVENTORY FORM – ELECTRONIC RECORDS

Government Institution:			
Branch/Division:			
Contact Name (if other than Designated Records Officer):			
Tel:		email:	
Location of Records:		Transfer/Transit # (if applicable):	

Historical Context

Originating Government Institution & Division/Branch (i.e. where it was originally created):	
Purpose of the Record (include any background information that may help identify the records series/ function including position title of records creator, office, program, etc.)	

NOTE: A GOVERNMENT INSTITUTION MAY USE THEIR OWN INVENTORY FORMS, PROVIDING ALL PERTINENT INFORMATION IS INCLUDED AND FORMS ARE ATTACHED TO THE APPROPRIATE PROVINCIAL ARCHIVES REQUEST OR NOTIFICATION FORM.

For more information please contact the Information Management Services (IMS) at 787-0734, or recordhelp@archives.gov.sk.ca, or www.saskarchives.com.

Software/ File Type	Size (# of items, MB, GB, etc.)	File Type/Description	Inclusive Dates	Schedule Name/Number	Schedule Item # (primary and secondary # or records series #)	Date Eligible For Disposal	Archives Use Only

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