## **Agency Records Disposition Schedule**



Department: Office of Administration

Division: Risk Management Section

Section:

Sub-Section:

TITLE: General Liability Claims CUTOFF: EOSFY

**DESCRIPTION:** State liability claim, including incidents only. These files contain the

accident on state property form as reported by the state agencies,

correspondence, and supporting payment documentation.

NOTES:

**DISPOSITION ACTION:** Destroy

**RETENTION:** Years: 25 Months: 0 Days: 0

**RETENTION:** Years: 15 Months: 0 Days: 0

**RETENTION:** Years: 7 Months: 0 Days: 0

SERIES: 22534 SERIES STATUS: Approved APPROVAL DATE: 8/2/2007

TITLE: Injury Claims CUTOFF: EOSFY

**DESCRIPTION:** Files on each reported claim. These files contain the employee injury

report, medical reports, correspondence and other pertinent working

documents.

NOTES:

**DISPOSITION ACTION:** Destroy

SERIES: 22535 SERIES STATUS: Approved APPROVAL DATE: 8/2/2007

TITLE: Injury Payment Fund CUTOFF: EOSFY

**DESCRIPTION:** Warrant request and Special Payment Vouchers (PVS) or showing

payments issued to vendors, both medical and legal, made on behalf of injured workers in accordance with alleged injuries reported under

workers' compensation.

NOTES:

**DISPOSITION ACTION:** Destroy

SERIES: 22536 SERIES STATUS: Approved APPROVAL DATE: 8/2/2007

## **Agency Records Disposition Schedule**



Department: Office of Administration

Division: Risk Management Section

Section:

Sub-Section:

TITLE: Legal Expense Fund CUTOFF: EOSFY

**DESCRIPTION:** Claims from the legal expense fund. These files contain payment requests **RETENTION:** Years: 25 Months: 0 Days: 0

with supporting documentation from the Office of the Attorney General for

resolution of lawsuits and judgments payable under the state legal

expense fund.

NOTES:

**DISPOSITION ACTION:** Destroy

SERIES: 22537 SERIES STATUS: Approved APPROVAL DATE: 8/2/2007

TITLE: Motor Vehicle Claims CUTOFF: EOSFY

**DESCRIPTION:** All motor vehicle claims, including conservation and incidents. These files

contain the auto loss notice form as reported by the state agencies,

correspondence, and supporting payment documentation

NOTES:

**DISPOSITION ACTION:** Destroy

SERIES: 22533 SERIES STATUS: Approved APPROVAL DATE: 8/2/2007

TITLE: Original Insurance Policies and Bonds

CUTOFF: Expiration of policy or bond

**DESCRIPTION:** Actual insurance policies and bonds that provide evidence of coverage by **RETENTION:** Years: 10 Months: 0 Days: 0

the state.

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**RETENTION:** Years: 25 Months: 0 Days: 0

NOTES:

**DISPOSITION ACTION:** Destroy

SERIES: 22538 SERIES STATUS: Approved APPROVAL DATE: 8/2/2007