



Transmittal Document for Boxes to Be Destroyed

Instructions: Fill out this form for **each** box to be shredded. Tape this form to the FRONT of the box, do not attach to the top. Once all boxes are labeled and ready, submit a work order requesting the boxes are picked up and delivered to the Facilities Warehouse for storage until they are destroyed. When requesting the work order, indicate the total number of boxes to be picked up for shredding.

Date: _____ Originating Site: _____

Originating Dept: _____ Box _____ of _____

Contents of this box:

— THIS BOX IS TO BE SHREDDED —

Signature: _____ Date: _____



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