Notification of General Records Contidute Aut	phon
Schedule Title: Administrative and Related Records General Records Schedule	Date:
Instructions:	
Complete and send the original and 2 copies to: State Archivist, Wisconsin Historical Soc WI 53706.	ciety (WHS), 816 State St., Madison
 Do not opt out of a record series because your agency does not create or use the form does not obligate an agency to create records. It only requires that records retention time periods and dispositions if such records exist. See the Introduction more information. 	be retained in accordance with the
 Attach a brief narrative explaining your rationale for opting out of each record ser prepared, identify that the record series is in lieu of the general schedule and cro 	
NOTE: Destruction or transfer of records is not permitted until this form is sig Records Board.	ned by the WHS and the Public
Wisconsin Government Agency:	·
Address:	
This is to notify the Wisconsin Historical Society and the Public Records Board that the a the general records schedule and taken the following action (check appropriate box):	gency named above has reviewed
Opt In: We adopt the entire schedule. (Available for University of Wisconsin [UW] Sy Government)	stem and Local Units of
Opt In With Revisions: We opt (out of), (in to), (circle one) the following record series Local Units of Government) List the specific retention schedule numbers and titles:	. (Available for UW System and
Opt Out: We opt out of the general records schedule (in whole), (in part), (circle one) (All applicable records disposition must cease until separate retention schedule by the Public Records Board.) List the specific retention schedule numbers and title	les are developed and approved
Agency Head/Deputy Signature Da	te Signed
Agency Records Officer Signature Da	te Signed
The Public Records Board and Wisconsin Historical Society acknowledge your Notification authorized to retain, transfer, and dispose of records as indicated on the schedule.	on of Adoption. You are hereby
State Archivist Signature Da	te Signed
PRB Executive Secretary Signature Da	te Signed

	Notification of Ocheral Records Concadic P	aoption
Schedule Title:	Budget and Related Records General Records Schedule	Date:
Instructions:		
Complete and send t WI 53706.	he original and 2 copies to: State Archivist, Wisconsin Historical	Society (WHS), 816 State St., Madison
form does no	ut of a record series because your agency does not create or use of obligate an agency to create records. It only requires that recor e periods and dispositions if such records exist. See the Introduc ation.	ds be retained in accordance with the
	f narrative explaining your rationale for opting out of each record entify that the record series is in lieu of the general schedule and	
NOTE: Destruc Records	tion or transfer of records is not permitted until this form is Board.	signed by the WHS and the Public
Wisconsin Governme	ent Agency:	
Address:		
	Visconsin Historical Society and the Public Records Board that the schedule and taken the following action (check appropriate box):	e agency named above has reviewed
Opt In: We adopt Government)	t the entire schedule. (Available for University of Wisconsin [UW]	System and Local Units of
	sions: We opt (out of), (in to), (circle one) the following record ser overnment) List the specific retention schedule numbers and titles	
(All applicable r	out of the general records schedule (in whole), (in part), (circle o records disposition must cease until separate retention scheecords Board.) List the specific retention schedule numbers and	dules are developed and approved
Agency Head/Deputy S	Signature	Date Signed
Agency Records Office	r Signature	Date Signed
	Board and Wisconsin Historical Society acknowledge your Notific transfer, and dispose of records as indicated on the schedule.	ation of Adoption. You are hereby
State Archivist Signatur	re	Date Signed
PRB Executive Secreta	ary Signature	Date Signed

	Notification of General Necords Schedule A	Adoption
Schedule Title:	Facilities Management and Related Records General Records Sched	lule Date:
Instructions:		
Complete and se WI 53706.	end the original and 2 copies to: State Archivist, Wisconsin Historical	Society (WHS), 816 State St., Madison
form doe retention	opt out of a record series because your agency does not create or use es not obligate an agency to create records. It only requires that recon in time periods and dispositions if such records exist. See the Introduc- cormation.	rds be retained in accordance with the
	brief narrative explaining your rationale for opting out of each record d, identify that the record series is in lieu of the general schedule and	
	struction or transfer of records is not permitted until this form is cords Board.	signed by the WHS and the Public
Wisconsin Gove	rnment Agency:	
Address:		
	he Wisconsin Historical Society and the Public Records Board that the rds schedule and taken the following action (check appropriate box):	
Opt In: We a	adopt the entire schedule. (Available for University of Wisconsin [UW]	System and Local Units of
	Revisions: We opt (out of), (in to), (circle one) the following record set of Government) List the specific retention schedule numbers and titles	
Opt Out: We opt out of the general records schedule (in whole), (in part), (circle one). (Available for State Agencies) (All applicable records disposition must cease until separate retention schedules are developed and approved by the Public Records Board.) List the specific retention schedule numbers and titles:		
Agency Head/Dep	outy Signature	Date Signed
Agency Records (Officer Signature	Date Signed
	ords Board and Wisconsin Historical Society acknowledge your Notification, transfer, and dispose of records as indicated on the schedule.	cation of Adoption. You are hereby
State Archivist Sig	nature	Date Signed
PRB Executive Se	ecretary Signature	Date Signed

	p	
Schedule Title: Fiscal and Accounting and Related Records General Records Schedule	dule Date:	
Instructions:		
Complete and send the original and 2 copies to: State Archivist, Wisconsin Historica WI 53706.	al Society (WHS), 816 State St., Madison	
 Do not opt out of a record series because your agency does not create or us form does not obligate an agency to create records. It only requires that recordent retention time periods and dispositions if such records exist. See the Introdumore information. 	ords be retained in accordance with the	
 Attach a brief narrative explaining your rationale for opting out of each record prepared, identify that the record series is in lieu of the general schedule and 		
NOTE: Destruction or transfer of records is not permitted until this form is Records Board.	s signed by the WHS and the Public	
Wisconsin Government Agency:		
Address:		
This is to notify the Wisconsin Historical Society and the Public Records Board that the general records schedule and taken the following action (check appropriate box)		
Opt In: We adopt the entire schedule. (Available for University of Wisconsin [UW Government)	/] System and Local Units of	
Opt In With Revisions: We opt (out of), (in to), (circle one) the following record so Local Units of Government) List the specific retention schedule numbers and title		
Opt Out: We opt out of the general records schedule (in whole), (in part), (circle one). (Available for State Agencies) (All applicable records disposition must cease until separate retention schedules are developed and approved by the Public Records Board.) List the specific retention schedule numbers and titles:		
Agency Head/Deputy Signature	Date Signed	
Agency Records Officer Signature	Date Signed	
The Public Records Board and Wisconsin Historical Society acknowledge your Notif authorized to retain, transfer, and dispose of records as indicated on the schedule.	ication of Adoption. You are hereby	
State Archivist Signature	Date Signed	
PRB Executive Secretary Signature	Date Signed	

	Notification of General Records Schedule A	Adoption
Schedule Title: _	Human Resources and Related Records General Records Schedu	le Date:
Instructions:		
Complete and ser WI 53706.	nd the original and 2 copies to: State Archivist, Wisconsin Historical	Society (WHS), 816 State St., Madison
form does	of out of a record series because your agency does not create or uses not obligate an agency to create records. It only requires that recotime periods and dispositions if such records exist. See the Introduct rmation.	rds be retained in accordance with the
	orief narrative explaining your rationale for opting out of each record identify that the record series is in lieu of the general schedule and	
	ruction or transfer of records is not permitted until this form is ords Board.	signed by the WHS and the Public
Wisconsin Govern	nment Agency:	
Address:		
	e Wisconsin Historical Society and the Public Records Board that the schedule and taken the following action (check appropriate box):	e agency named above has reviewed
Opt In: We ad Government)	dopt the entire schedule. (Available for University of Wisconsin [UW]	System and Local Units of
	evisions: We opt (out of), (in to), (circle one) the following record se Government) List the specific retention schedule numbers and title	
(All applicab	opt out of the general records schedule (in whole), (in part), (circle of the records disposition must cease until separate retention schedule records Board.) List the specific retention schedule numbers and	edules are developed and approved
Agency Head/Depu	ty Signature	Date Signed
Agency Records Of	ficer Signature	Date Signed
	ds Board and Wisconsin Historical Society acknowledge your Notificin, transfer, and dispose of records as indicated on the schedule.	cation of Adoption. You are hereby
State Archivist Sign	ature	Date Signed
PRB Executive Sec	retary Signature	Date Signed

Notification of General Records Concurre	Adoption
Schedule Title: Information Technology and Related Records General Record	ls Schedul®ate:
Instructions:	
Complete and send the original and 2 copies to: State Archivist, Wisconsin Historica WI 53706.	ıl Society (WHS), 816 State St., Madison
 Do not opt out of a record series because your agency does not create or us form does not obligate an agency to create records. It only requires that rec- retention time periods and dispositions if such records exist. See the Introdu- more information. 	ords be retained in accordance with the
 Attach a brief narrative explaining your rationale for opting out of each record prepared, identify that the record series is in lieu of the general schedule and 	
NOTE: Destruction or transfer of records is not permitted until this form is Records Board.	s signed by the WHS and the Public
Wisconsin Government Agency:	
Address:	
This is to notify the Wisconsin Historical Society and the Public Records Board that the general records schedule and taken the following action (check appropriate box)	
Opt In: We adopt the entire schedule. (Available for University of Wisconsin [UW Government)	/] System and Local Units of
Opt In With Revisions: We opt (out of), (in to), (circle one) the following record so Local Units of Government) List the specific retention schedule numbers and title	
Opt Out: We opt out of the general records schedule (in whole), (in part), (circle (All applicable records disposition must cease until separate retention schedule hy the Public Records Board.) List the specific retention schedule numbers are	nedules are developed and approved
Agency Head/Deputy Signature	Date Signed
Agency Records Officer Signature	Date Signed
The Public Records Board and Wisconsin Historical Society acknowledge your Notification of Adoption. You are hereby authorized to retain, transfer, and dispose of records as indicated on the schedule.	
State Archivist Signature	Date Signed
PRB Executive Secretary Signature	Date Signed

Notification of General Resorts Software Adop	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Schedule Title: Payroll and Benefits and Related Records General Records Schedule	Date:
Instructions:	
Complete and send the original and 2 copies to: State Archivist, Wisconsin Historical Socie WI 53706.	ety (WHS), 816 State St., Madisor
 Do not opt out of a record series because your agency does not create or use thes form does not obligate an agency to create records. It only requires that records be retention time periods and dispositions if such records exist. See the Introduction t more information. 	e retained in accordance with the
 Attach a brief narrative explaining your rationale for opting out of each record series prepared, identify that the record series is in lieu of the general schedule and cross 	
NOTE: Destruction or transfer of records is not permitted until this form is signed Records Board.	ed by the WHS and the Public
Wisconsin Government Agency:	
Address:	
This is to notify the Wisconsin Historical Society and the Public Records Board that the age the general records schedule and taken the following action (check appropriate box):	ency named above has reviewed
Opt In: We adopt the entire schedule. (Available for University of Wisconsin [UW] Syst Government)	em and Local Units of
Opt In With Revisions: We opt (out of), (in to), (circle one) the following record series. (Local Units of Government) List the specific retention schedule numbers and titles:	Available for UW System and
Opt Out: We opt out of the general records schedule (in whole), (in part), (circle one). ((All applicable records disposition must cease until separate retention schedule by the Public Records Board.) List the specific retention schedule numbers and titles	s are developed and approved
Agency Head/Deputy Signature Date	Signed
Agency Records Officer Signature Date	Signed
The Public Records Board and Wisconsin Historical Society acknowledge your Notification authorized to retain, transfer, and dispose of records as indicated on the schedule.	of Adoption. You are hereby
State Archivist Signature Date	Signed
PRB Executive Secretary Signature Date	Signed

Notification of General Resources Confedence	Adoption
Schedule Title: Purchasing and Procurement and Related Records General Record S	Schedule Date:
Instructions:	
Complete and send the original and 2 copies to: State Archivist, Wisconsin Historica WI 53706.	l Society (WHS), 816 State St., Madison
 Do not opt out of a record series because your agency does not create or us form does not obligate an agency to create records. It only requires that record retention time periods and dispositions if such records exist. See the Introdumore information. 	ords be retained in accordance with the
 Attach a brief narrative explaining your rationale for opting out of each record prepared, identify that the record series is in lieu of the general schedule and 	
NOTE: Destruction or transfer of records is not permitted until this form is Records Board.	s signed by the WHS and the Public
Wisconsin Government Agency:	
Address:	
This is to notify the Wisconsin Historical Society and the Public Records Board that the general records schedule and taken the following action (check appropriate box)	
Opt In: We adopt the entire schedule. (Available for University of Wisconsin [UW Government)	/] System and Local Units of
Opt In With Revisions: We opt (out of), (in to), (circle one) the following record so Local Units of Government) List the specific retention schedule numbers and title	
Opt Out: We opt out of the general records schedule (in whole), (in part), (circle (All applicable records disposition must cease until separate retention schedule numbers and by the Public Records Board.) List the specific retention schedule numbers and	nedules are developed and approved
Agency Head/Deputy Signature	Date Signed
Agency Records Officer Signature	Date Signed
The Public Records Board and Wisconsin Historical Society acknowledge your Notification of Adoption. You are hereby authorized to retain, transfer, and dispose of records as indicated on the schedule.	
State Archivist Signature	Date Signed
PRB Executive Secretary Signature	Date Signed

	Notification of General Necolus Schedule A	Adoption
Schedule Title: _	Risk Management and Related Records General Records Schedu	le Date:
Instructions:		
Complete and ser WI 53706.	nd the original and 2 copies to: State Archivist, Wisconsin Historical	Society (WHS), 816 State St., Madison
form does	of out of a record series because your agency does not create or use is not obligate an agency to create records. It only requires that recontime periods and dispositions if such records exist. See the Introduction.	rds be retained in accordance with the
	orief narrative explaining your rationale for opting out of each record identify that the record series is in lieu of the general schedule and	
	ruction or transfer of records is not permitted until this form is rds Board.	signed by the WHS and the Public
Wisconsin Govern	nment Agency:	
Address:		
	e Wisconsin Historical Society and the Public Records Board that the schedule and taken the following action (check appropriate box):	
Opt In: We ac Government)	lopt the entire schedule. (Available for University of Wisconsin [UW]	System and Local Units of
	evisions: We opt (out of), (in to), (circle one) the following record se Government) List the specific retention schedule numbers and title	
Opt Out: We opt out of the general records schedule (in whole), (in part), (circle one). (Available for State Agencies) (All applicable records disposition must cease until separate retention schedules are developed and approved by the Public Records Board.) List the specific retention schedule numbers and titles:		
Agency Head/Depu	ty Signature	Date Signed
Agency Records Of	ficer Signature	Date Signed
	ds Board and Wisconsin Historical Society acknowledge your Notificin, transfer, and dispose of records as indicated on the schedule.	cation of Adoption. You are hereby
State Archivist Sign	ature	Date Signed
PRB Executive Sec	retary Signature	Date Signed

Notification of General Resolutional Principal	aoption	
Schedule Title: Wisconsin Municipal and Related Records General Records Sche	eduleDate:	
Instructions:		
Complete and send the original and 2 copies to: State Archivist, Wisconsin Historical WI 53706.	Society (WHS), 816 State St., Madisor	
 Do not opt out of a record series because your agency does not create or use form does not obligate an agency to create records. It only requires that recor retention time periods and dispositions if such records exist. See the Introduc- more information. 	ds be retained in accordance with the	
 Attach a brief narrative explaining your rationale for opting out of each record prepared, identify that the record series is in lieu of the general schedule and 		
NOTE: Destruction or transfer of records is not permitted until this form is Records Board.	signed by the WHS and the Public	
Wisconsin Government Agency:		
Address:		
This is to notify the Wisconsin Historical Society and the Public Records Board that the general records schedule and taken the following action (check appropriate box):	e agency named above has reviewed	
Opt In: We adopt the entire schedule. (Available for University of Wisconsin [UW] Government)	System and Local Units of	
Opt In With Revisions: We opt (out of), (in to), (circle one) the following record ser Local Units of Government) List the specific retention schedule numbers and titles		
Opt Out: We opt out of the general records schedule (in whole), (in part), (circle one). (Available for State Agencies) (All applicable records disposition must cease until separate retention schedules are developed and approved by the Public Records Board.) List the specific retention schedule numbers and titles:		
Agency Head/Deputy Signature	Date Signed	
Agency Records Officer Signature	Date Signed	
The Public Records Board and Wisconsin Historical Society acknowledge your Notific authorized to retain, transfer, and dispose of records as indicated on the schedule.	ation of Adoption. You are hereby	
State Archivist Signature	Date Signed	
PRB Executive Secretary Signature	Date Signed	

Hotinoution of Scheral Resolus Schedule A	aoption	
Schedule Title: Wisconsin Public School District and Related Records	Date:	
General Records Schedule Instructions:		
Complete and send the original and 2 copies to: State Archivist, Wisconsin Historical S WI 53706.	Society (WHS), 816 State St., Madisor	
 Do not opt out of a record series because your agency does not create or use form does not obligate an agency to create records. It only requires that record retention time periods and dispositions if such records exist. See the Introduct more information. 	ds be retained in accordance with the	
 Attach a brief narrative explaining your rationale for opting out of each record sprepared, identify that the record series is in lieu of the general schedule and one of the general schedule. 		
NOTE: Destruction or transfer of records is not permitted until this form is s Records Board.	signed by the WHS and the Public	
Wisconsin Government Agency:		
Address:		
This is to notify the Wisconsin Historical Society and the Public Records Board that the the general records schedule and taken the following action (check appropriate box):	e agency named above has reviewed	
Opt In: We adopt the entire schedule. (Available for University of Wisconsin [UW] Government)	System and Local Units of	
Opt In With Revisions: We opt (out of), (in to), (circle one) the following record series. (Available for UW System and Local Units of Government) List the specific retention schedule numbers and titles:		
Opt Out: We opt out of the general records schedule (in whole), (in part), (circle one). (Available for State Agencies) (All applicable records disposition must cease until separate retention schedules are developed and approved by the Public Records Board.) List the specific retention schedule numbers and titles:		
Agency Head/Deputy Signature	Date Signed	
Agency Records Officer Signature	Date Signed	
The Public Records Board and Wisconsin Historical Society acknowledge your Notifica authorized to retain, transfer, and dispose of records as indicated on the schedule.	ation of Adoption. You are hereby	
State Archivist Signature	Date Signed	
PRB Executive Secretary Signature	Date Signed	