F2 LOGISTICS LET'S MOVE. NOW.	Document Disposal Request Form Forms & Templates		Document Number: FM-SS-11.19
	Department: Quality Assurance	Effective Date: October 18, 2019	Revision No 0

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		REVISION NO:	0
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BUSINESS UNIT:

DEPARTMENT:

DATE:

Record Name	Description of Records	Date Range From (yyyy/mm/dd)	Date Range To (yyyy/mm/dd)	Quantity of Records (No. of boxes, No. of folders, No. of files for soft copy)	Retention Period as per the Records Retention Schedule	Destruction Method (Shred/Delete/Dispose)

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Records Coordinator Department Head Document Controller

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