

CITY OF LOS ANGELES
NOTICE OF INTENTION TO DESTROY OBSOLETE RECORDS

* **Records of Department:**

Additional Information:

Submitting Date: **Email me a copy**

* **Quantity:**

Records Dated From **To**

Description:

Attachment: [2 MB max] [DOT64 65 boxes 06272024.pdf](#)

Department Authorization

Authorizing Person: **Date:**

City Clerk Authorization

In accordance with Section 12.5 (d) of the Los Angeles Administrative Code (LAAC) and the Mayor's Executive Directive No. 50, I hereby certify that the attached Request for Authority to Dispose of Obsolete Records has been reviewed by my office and to the best of my knowledge is complete, accurate, and adequate. City Clerk staff have reviewed the request for historical content and removed any items of unique historical value.

APPROVE **REJECT**

Authorizing Person:

Signature:



Date Signed:

Date of Notification: (Records will be held for 60 days from this date).