



RECORDS RETENTION AND DISPOSITION SCHEDULE

Family And Social Services Administration. Disability And Rehabilitative Services, Division of. Blind.

Agency: Family And Social Services Administration		Division: Disability And Rehabilitative Services, Division of	
ITEM NO.	RECORD SERIES	TITLE/DESCRIPTION <i>(This Retention Schedule is approved on a space-available basis)</i>	RETENTION PERIOD
1	2011-17	CONFIDENTIAL REPORT OF BLINDNESS OR VISUAL IMPAIRMENT State Form 48126, completed by all Indiana optometrists and ophthalmologists when a diagnosis of legal blindness is made for any new patient; doctors- offices must submit completed forms to Blind Services. Forms are copied and forwarded to appropriate sources for services and data collection. Disclosure of these records may be affected by 45 CFR 160 and 164 (HIPAA).	DELETE data upon deactivation of the file due to death, regained sight, or out-of-state address change.
2	84-1110	VENDING FACILITY REVIEW FORM This is the form created to standardize the criteria used to evaluate facility and operator performance. This review of each vending facility is done monthly by the supervisor or area manager (IRS 2009 DSB). Forms are filed by facility location within each city.	TRANSFER to the INDIANA ARCHIVES, for EVALUATION, SAMPLING or WEEDING pursuant to archival principles after two (2) years.
3	84-1113	INDIVIDUAL VENDING FACILITY SUMMARY REPORTS Record was created as a simplified method of compiling all vending facility reports received from a specific vending operation, it is a quick reference at any time during the fiscal year as well as for use in preparing the annual report to the federal government on the facility program (IRS 0007 DSB).	DELETE data after submission of the corresponding annual report to the federal government, AND after transfer of one (1) copy of report to the INDIANA ARCHIVES under Record Series GRPUB-2.