

FLORIDA STATE RECORDS CENTER
REQUEST FOR RETURN OF REFERENCE SERVICE WORK
(RE-FILE SERVICE)

1. BOXES/FILES TO BE RETURNED (RE-FILED)

a. Line Number	b. DESCRIPTION OF BOX OR FILE TO BE RETURNED (RE- FILED)	c. Barcode Number ("C" number or Acc + SRC Number for boxes, or "F" number for files)
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		

2. Remarks

3. Name of Requester	4. Telephone No.	8. Receipt for Returned Records (SRC Staff) I have received the above listed records.
5. Location	6. Date	8. (a) Signature
7. Agency		8. (b) Date