****Accession Number: (for office use only) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Records Transfer Form**

This form *must* be completed and emailed to archives@toronto.anglican.ca before arranging transfer of materials. We will then contact you to arrange delivery.

Retain a copy of this form for your records. Please also place a copy of the form in one of the boxes. Shaded areas are for Diocesan Archives staff use only.

**Always contact the Archivist before transferring material.**

Date of transfer: Click here to enter text.

Parish: Click here to enter text.

Name of Priest: Click here to enter text.

Name of Depositor (if different): **Click here to enter text.**

Email: Click here to enter text.

Telephone: Click here to enter text.

Please list all volumes or files on the attached sheet. Records may be usefully arranged in the following order: minutes, financial records, building and property files, registers, correspondence, reports of groups and committees, photographs and other media. Records must be clearly organized and labelled. Please indicate if records are paper or digital.

**Please ensure you sign the form on page 3.**

Are the items being transferred due to the church closing?

[ ]  Yes [ ]  No

Records not retained by the Archives should be (tick one):

[ ]  Returned [ ]  Destroyed

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| BOX NO.  | BOX DESCRIPTION (INCL. DATE RANGE) | RETENTIONSCHEDULE (if applicable) | MEDIA TYPE(paper or electronic) | NOTES (for office use only) |
| *e.g. USB stick*  | *e.g. Vestry Minutes 2010-2018* | *Permanent* | *Digital* |  |
| *e.g. Box 1*  | *e.g. Giving Envelopes 2014\* (\*would only be sent to Diocese if church was closing within 7 years of records created)* | *2021* | *Paper* |  |
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|  |  *Please continue on a separate sheet if necessary* |  |  |  |
| TOTAL NUMBER OF BOXES | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| TRANSFER AUTHORIZED BY (INCUMBENT, OTHER) *(Please print)*Click here to enter text. | SIGNATUREClick here to enter text. | DATE Click here to enter text. |
| DATE RECEIVED BY ARCHIVES   **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | SIGNATURE OFRECEIVING ARCHIVIST  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

*Once boxes have been received by the Diocesan Archives, a signed copy of this form will be returned to the parish for their records.*