

RECORDS DESTRUCTION DOCUMENT (RM88)

NO.

PAGE 1 OF 1 PAGES

1. AGENCY NAME AND DIVISION/PROGRAM:

Yellowstone County Elections

2. AGENCY CONTACT:

NAME: KV Aldrich

PHONE #: (406)256-2740

EMAIL: elections@yellowstonecountymt.gov

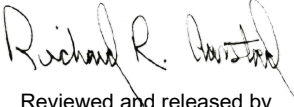
3. NOTICE OF INTENTION: The schedule records listed in Item 5 are to be disposed of in the manner checked below (specify only one).

Delete Incinerate Shred as Classified Toss without Restriction

Other: Explain

4. SUBMITTED BY: I hereby certify that the records to be disposed of are correctly represented below, that any audit requirements or **Offer to the State Historical Society Archives** has been fully justified, and that further retention is not required for any litigation pending or imminent. Documentation attached from Historical Society.

SIGNATURE: /s/ K.V. Aldrich
 NAME AND TITLE: K.V. Aldrich
 DATE: 11/25/2024



Reviewed and released by
 the Montana State Archivist
 12/02/2024.

5. LIST OF RECORD SERIES

NOTE: Attach any inventories or Excel spreadsheets to this form to help validate records destroyed.

a. Retention Schedule Number	b. Item number listed on Retention Schedule	c. Record Series Title	d. Retention in months/years	e. Inclusive Dates	f. Volume in Cubic Feet	g. Disposition Action and Date completed after Authorization
3	6	Ballots - County/local. Secrecy and affidavit envelopes	1 Year	11/2023	35.1	
3	6	Rejected ballots, undeliverable ballots, provisional ballots, unused ballots	1 year	11/2023	3.75	
3	6	Undeliverable ballots	1 year	11/2023	5.1	
3	6	Undeliverable ballots, resolution ballots	1 year	11/2023	1	
3	6	Misc. ballots, ballots received too late for the election	1 year	11/2023	1.75	
3	6	Stubs, spoiled ballots, rejected ballots, test ballots, resolution ballots, write-in log	1 year	11/2023	4.75	
3	6	Counted ballots	1 year	11/2023	16.8	

6. DISPOSAL AUTHORIZATION: Disposal for the above listed records is authorized. Any deletions or modifications are indicated.

Custodian/Records Manager
 Name: John Ostlund, Chair Date:
 Signature:

7. DISPOSAL CERTIFICATE: The above listed records have been disposed of in the manner and on the date shown in column g.

Name and Title:
 Signature: