

**INSTRUCTIONS FOR ARM-160
RECORD REQUEST FORM**

If you need further instructions, call 502-564-3617 and speak to anyone who answers. An alternate phone number is 502-564-1703.

- 1) Enter your agency name (state agency, county name, etc).
- 2) Enter your office name (Archives and Records Management Division, circuit or district court, etc).
- 3) Enter your name.
- 4) Enter a contact phone number where we can reach you, and your extension if any. If this is a copy request for a customer enter the customer's phone number here.
- 5) Enter the action for this request (Example: send to a John Smith on receipt of record).
- 6) Check Original or Photocopy. Do you need the original record or a photocopy? Only the custodial agency can request that the original record be sent out. Other parties need to request a copy. There is a charge for copy service.
- 7) Enter your agency's address (and a mail stop if any). If this a copy request for a patron, enter the patron's billing address here.
- 8) Location is listed on the Agency Locator copy of the appropriate records transmittal in the block labeled **Location in Center** on the left side of the form. (The format for the State Records Center is Letter and Letter-Number-Number {Example: WA-10-100}; the format for State Archives Center is (Letter and Number/Letter and Number - Number. [Example: C31/E1-A])
- 9) Accession Number is listed on the Agency Locator copy of the appropriate records transmittal in the small box at the top right. (Example: R2007-1234 or A2007-1234). In the case of accessions in years prior to 1983 the format will be the number of the shipment followed by the year of the shipment. (Example: Transmittal 1 of 1982).
- 10) Unit Number is listed on the Agency Locator copy of the appropriate records transmittal in the block labeled **Box; Roll; Book; Bundle; or Other** second from the left.
- 11) This is the title of the record (name on case or description of the file).
- 12) This is the case number or file number.
- 13) Indicate whether you will be returning the record to the State Records Center or the State Archives Center (Yes or No).
- 14) Libraries and Archives use only.
- 15) Libraries and Archives use only.
- 16) In this block you can note specific instructions to follow once you receive the record, or you can enter instructions to ensure we understand your request.
- 17) Libraries and Archives use only.
- 18) These are the addresses to send records back for storage. Accession numbers beginning with an "R" are to be sent back to the State Records Center. Accession numbers beginning with an "A" are to be sent back to the State Archives Center.

RECORD REQUEST

Archives and Records Management Division - Kentucky Department for Libraries and Archives

(1) Requesting Agency:		(2) Unit:		(7) Billing/Mailing Address:			
(3) Requested By:		(4) Telephone Number:					
(5) Action:		Date	(6) Request For: <input type="checkbox"/> Original <input type="checkbox"/> Photocopy				
(8) Location in Center	(9) Accession Number	(10) Unit Number	(11) Record Series Title	(12) Identification Number	(13) To Be Returned?	Date Record	
						(14) Out	(15) In
(16) Special Instructions							
<input type="checkbox"/> Agency Office Instructions							
(17) Retrieved By/Date		(18) Return Record To:					
		<input type="checkbox"/> State Records Center 1425 Leestown Road Frankfort, Kentucky 40601 (502) 564-3617 State.Records@ky.gov			<input type="checkbox"/> State Archives Center 300 Coffee Tree Road Frankfort, Kentucky 40601 (502) 564-1787 KDLA.Archives@ky.gov		