					NO.					
RECORDS DESTRUCTION DOCUMENT (RM					PAGE 1 OF 1 PAGES					
1. AGENCY NAME AND DIVISION/PROGRAM: 2. AG				NCY CONTACT:						
Yellowstone County Elections NAME:					K.V. Aldrich, Election Administrator					
					#: (406)256-2740 kvaldrich@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.										
imminent.					Richard R. Aarstad					
SIGNATURE: /s/ K.V. Aldrich					Signed and released 08/01/2024					
NAME AND TITLE: K.V. Aldrich, Election Administrator					by the Montana State Archivist.					
DATE: 08/1/24 (for destruction after 8/27/2024) 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 months/s		e. Inclusive Dates	f. Volume in Cubic Feet	g. Disposition Action and Date completed after Authorization	
	_	Voted/unvoted/unused/			22		44/20	454	7.0011200011	
3	7	undeliverable/resolution board ballots			22 mont	ns	11/20	151		
3	1	Absentee ballot envelopes, affavait & secrecy envelopes			22 montl	hs	11/20	88.15		
		Absentee ballot logs; absentee ballot								
3	2	requests			22 montl	hs	11/20	1.8		
3	18	Mail ballot elections materials			12 montl	hs	9/20	1		
3	1	Absentee ballot envelopes, affavait & secrecy envelopes			22 montl	hs	6/20	7		
3	7	Ballots - unused, no signature, rejected, test, report		22 montl	hs	6/20	11.15			
6. DISPOSAL AUTHORIZATION : Disposal for the above listed records is authorized. Any deletions or modifications are indicated.				7. DISPOSAL CERTIFICATE: The above listed records have been disposed of in the manner and on the date shown in column g.						
Custodian/Records Manager				Name and Title:						
Name: John Ostlund, Chair Date:				Signature:						
Signature:										