APPLICATION FOR RECORDS RETENTION SCHEDULE

OFFICE OF THE SECRETARY OF STATE
DEPARTMENT OF ARCHIVES AND HISTORY
RECORDS MANAGEMENT DIVISION

INSTRUCTIONS: See Publication No. 76–RM–1 for instructions on completing this form. Forward signed original to Department of Archives and History, Records Management Division, 330 Capitol Avenue, Atlanta, Georgia, 30334, Attention: Scheduling Section. 881101-01

FOR AGENCY USE	1. Agency Address	FOR RECORDS MANAGEMENT USE
Application Date: 10/22/88	Risk Management Office GEORGIA PORTS AUTHORITY P. O. BOX 2406 SAVANNAH, GEORGIA 31402	Application Number: 78-249-A
Application Number: 10-22-88		Date Received: NOV 1 1988 / Date Completed: JUL 07 1989

2. Person to Contact: CHAD GRIZZLE
Working Title: MANAGER OF SUPPORT SERVICES
Telephone Number: (912) 964-3908

3. Action Requested

a. ☐ Establish Retention Schedule; record will continue to accumulate.
b. ☐ Dispose of present accumulation; no further accumulation anticipated.
c. ☒ Amend Application No. 78-249-A Check One: ☐ Change; ☒ Supercede; ☐ Void

4. Dates of Series

Earliest	Latest
1988	to date

5. Records Series Title *(followed by title used in office; if different)*

GROUP MEDICAL INSURANCE CLAIM FILE ( )

6. Division and Office Function What is the function of the Division and the Office in which this record series is created?

The Risk Management Office administers the group medical plan document and G.P.A. Group Medical Policy. The office maintains group medical cards which establish employee and dependent coverage. The office is responsible for maintaining group medical claims and payments on accounts according to established policy.

7. Record Series Description This file contains the following documents *(include form numbers and titles, if any)*: Attach samples of the file.

Documents relating to: Group Medical Insurance Claims which are a result of a personal illness or injury not job related.

Included are: Original medical/dental bills, insurance claim form, worksheet and copies of checks.

File is arranged: Alphabetically by employee name, thereafter chronologically.

8. Monthly Reference Rate How often are records referred to which are:

One to six months old daily; Seven to twelve months old daily; Thirteen to twenty-four months old as needed twenty-five months and older rarely?

9. Annual Rate of Accumulation of Records

Letter-size drawers ____; Legal-size drawers ____; Shelves ____; Other *(specify)* 10 boxes annually

X		a. Is this the official copy of the series? If not, where is it?
X		b. Does the series contain confidential information requiring security handling? If yes, cite law or regulation.
	X	c. Is this a vital record?
	X	d. Does this series have historical or long term research value?
	X	e. When one or two documents in the file make it necessary to keep the entire file for a long period, could these documents be scheduled separately?
	X	f. Is the information contained in this series ever published? If yes, attach copy.
X		g. Is the information contained in this series ever analyzed and/or recorded in a summarized report? If yes, attach copy.
	X	h. Is there a duplication of this series in your office, or in another office or agency? If yes, where?
	X	i. Is this series *(or a major portion of it)* regularly microfilmed?
	X	j. Does the record series result in a computer printout?

11. Retention Requirements The following requires the series to be kept:

a. State Law _____ years.
b. Statute of limitation _____ years.
c. Federal law _____ years.
d. Audit period _____ years.
e. Administrative need _____ years.
f. Federal retention instructions _____ years.

Attach copy or excerpt of law or regulations. Explain administrative need.
Ga. Code Ann. ~~33-30-7~~ 33-30-6 (7) "no action shall be brought after the expiration of three years after the time written proof of loss is required to be furnished;..."

12. Approved Disposition Instructions This agency recommends that the file series be cut off at the end of each:

☒ Calendar Year; ☐ Fiscal Year; ☐ Other _____ then,

☒ Hold in the current files area _____ month(s) * year(s); then
☐ Transfer to local holding area, hold _____ year(s); then
☐ Transfer to State Records Center; hold _____ year(s); then
☐ Destroy.
☐ Transfer to State Archives for permanent retention.
☐ Other *(Specify)*

*Cut off file at end of each calendar year, hold in current files area one year or until audit is completed. Whichever is later; then transfer to G.P.A. record retention center, hold two years; then destroy.

These instructions apply to all prior and future accumulations of the series.

Agency Head/Designee *(Signature)*	Date	Records Management Officer *(Signature)*	Date
RAY SMILEY	10/26/88		10/26/88
X CHAD GRIZZLE		State Records Committee *(Signature)*	Date
Recommendations in paragraph 12 are approved. *(If disapproved, attach letter of explanation.)* 78-249-A	State Auditor/Designee		7/5/89
	Secretary of State/Designee		7/3/89
	~~Attorney General~~ Governor/Designee		7/7/89

AR-50-71; Rev. 76 (Reverse Side)

APPLICATION FOR RECORDS RETENTION SCHEDULE

870202-05

OFFICE OF THE SECRETARY OF STATE
DEPARTMENT OF ARCHIVES AND HISTORY
RECORDS MANAGEMENT DIVISION

INSTRUCTIONS: See Publication No. 76–RM–1 for instructions on completing this form. Forward signed original to Department of Archives and History, Records Management Division, 330 Capitol Avenue, Atlanta, Georgia, 30334. Attention: Scheduling Section.

FOR AGENCY USE

Application Date: 11/21/85

Application Number: 125

1. Agency Address

Georgia Ports Authority
Administration Division, Personnel Office
Post Office Box 2406
Savannah, Georgia 31402

FOR RECORDS MANAGEMENT USE

Application Number: 78-249-A

Date Received: FEB 2 1987

Date Completed: MAR - 3 1987

2. Person to Contact: Ray Smiley

Working Title: Personnel Manager

Telephone Number: (912) 964-3966

3. Action Requested

a. ☐ Establish Retention Schedule; record will continue to accumulate.
b. ☐ Dispose of present accumulation; no further accumulation anticipated.
c. ☒ Amend Application No. 78-249 Check One: ☒ Change; ☐ Supercede; ☐ Void

4. Dates of Series

Earliest: 1983 | Latest: To Date

5. Records Series Title *(followed by title used in office; if different)*

Group Insurance Medical Claims File

6. Division and Office Function What is the function of the Division and the Office in which this record series is created?

The Personnel Office is involved in internal and external advertising, recruitment, interviewing and testing. Conducts salaried applicant interviews. Directs wage and benefit surveys. Directs benefit administration. Performs range and scale adjustments. Recommends benefit changes. Directs internal relations programs such as field and exit interviews, service pins, performance awards, employee committee, newspaper, newsletters, suggestion program, empliyee gifts, sports, parties and promotional clothing. Conducts grievance hearings, employee and supervisor counseling and employee assistance program. Advises management regarding employee morale. Directs preparation of required federal, state and internal reports and studies. Conducts affirmative action program. Advises management on changes to personnel policy and procedures. Prepares annual budget for department and monitors expenses. Directly reports to Director of Administration.

7. Record Series Description This file contains the following documents *(include form numbers and titles, if any)*: Attach samples of the file.

Documents relating to: Employee medical claims as a result of personal illness or injury not job related.

Included are: Copies of medical/dental bills, Insurance claim form, worksheet copies of checks.

File is arranged: Alphabetically by employee name, thereafter chronologically

8. Monthly Reference Rate How often are records referred to which are:

One to six months old daily; Seven to twelve months old daily; Thirteen to twenty-four months old as needed; twenty-five months and older rarely?

9. Annual Rate of Accumulation of Records

Letter-size drawers _____; Legal-size drawers _____; Shelves _____; Other *(specify)* 10 boxes

AR–50–71; Rev. 76 (Over)

	×	a. Is this the official copy of the series? If not, where is it? Jones & Hill Insurance Company
×		b. Does the series contain confidential information requiring security handling? If yes, cite law or regulation.
	×	c. Is this a vital record?
	×	d. Does this series have historical or long term research value?
×		e. When one or two documents in the file make it necessary to keep the entire file for a long period, could these documents be scheduled separately?
	×	f. Is the information contained in this series ever published? If yes, attach copy.
×		g. Is the information contained in this series ever analyzed and/or recorded in a summarized report? If yes, attach copy.
×		h. Is there a duplication of this series in your office, or in another office or agency? If yes, where? Jones & Hill
	×	i. Is this series *(or a major portion of it)* regularly microfilmed?
	×	j. Does the record series result in a computer printout?

11. Retention Requirements The following requires the series to be kept:

a. State Law	3 years.	d. Audit period	years.
b. Statute of limitation	years.	e. Administrative need	years.
c. Federal law	1 years.	f. Federal retention instructions	years.

Attach copy or excerpt of laws or regulations. Explain administrative need.
Ga. Code Ann. 33-30-7 "no action shall be brought after the expiration of three years after the time written proof of loss is required to be furnished; . . . "
Since the Personnel Office handles the filing of claims and the maintenance of related documents, they should retain their copies of these records accordingly.

12. Approved Disposition Instructions This agency recommends that the file series be cut off at the end of each:

☒ Calendar Year; ☐ Fiscal Year; ☐ Other _____ then,

- ☒ Hold in the current files area _____ month(s) 1 year(s); then
- ☒ Transfer to local holding area, hold 2 year(s); then
- ☐ Transfer to State Records Center; hold _____ year(s); then
- ☒ Destroy.
- ☐ Transfer to State Archives for permanent retention.
- ☐ Other *(Specify)*

These instructions apply to all prior and future accumulations of the series.

Agency Head/Designee *(Signature)*	Date	Records Management Officer *(Signature)*	Date
[illegible]	1/28/87	[illegible]	1/22/87

Recommendations in paragraph 12 are approved. *(If disapproved, attach letter of explanation.)*

	State Records Committee *(Signature)*	Date
State Auditor/Designee	[illegible]	2-4-87
Secretary of State/Designee	Edward Weldon	2/2/87
Attorney General/Designee	[illegible]	3/3/87

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APPLICATION FOR RECORDS RETENTION SCHEDULE

OFFICE OF THE SECRETARY OF STATE
DEPARTMENT OF ARCHIVES AND HISTORY
RECORDS MANAGEMENT DIVISION

INSTRUCTIONS: See Publication No. 76–RM–1 for instructions on completing this form. Forward signed original to Department of Archives and History, Records Management Division, 330 Capitol Avenue, Atlanta, Georgia, 30334, Attention: Scheduling Section.

FOR AGENCY USE

Application Date: 10-24-78

Application Number: 39

1. Agency Address

Georgia Ports Authority
Administration Division
Personnel Department
Post Office Box 2406
Savannah, Georgia 31402

FOR RECORDS MANAGEMENT USE

Application Number: 78-249

Date Received: OCT 27 1978

Date Completed: DEC 6 1978

2. Person to Contact: John J. Powers, Jr.

Working Title: Personnel Manager

Telephone Number: 964-1721, 283

3. Action Requested

a. ☒ Establish Retention Schedule; record will continue to accumulate.

b. ☐ Dispose of present accumulation; no further accumulation anticipated.

c. ☐ Amend Application No. _____ Check One: ☐ Change; ☐ Supercede; ☐ Void

4. Dates of Series

Earliest: 1975 Latest: To Date

5. Records Series Title *(followed by title used in office; if different)*

Group Insurance Medical Claims File

6. Division and Office Function What is the function of the Division and the Office in which this record series is created?

Responsible for the recruitment, training, job analysis and classification, formulation and implementation of personnel programs and procedures.

7. Record Series Description This file contains the following documents *(include form numbers and titles, if any):* Attach samples of the file.

Documents relating to: Employee medical claims as a result of personel illness or injury not job related.

Included are: List of bills (Form Per. 10), copies of bills, Jones & Hill Claim Form, worksheet and copy of check showing amount paid.

File is arranged: Alphabetically by employee name, thereafter chronologically.

8. Monthly Reference Rate How often are records referred to which are:

One to six months old 1; Seven to twelve months old 0; Thirteen to twenty-four months old 0; twenty-five months and older 0? Except if a question is raised with regard to a claim.

9. Annual Rate of Accumulation of Records

Letter-size drawers 1; Legal-size drawers _____; Shelves _____; Other *(specify)* _____

YES	NO	10. Questionnaire (Place an "X" in the proper column)
	X	a. Is this the official copy of the series? If not, where is it? Jones & Hill Insurance Company, Savannah, Georgia.
	X	b. Does the series contain confidential information requiring security handling? If yes, cite law or regulation.
	X	c. Is this a vital record?
	X	d. Does this series have historical or long term research value?
	X	e. When one or two documents in the file make it necessary to keep the entire file for a long period, could these documents be scheduled separately?
	X	f. Is the information contained in this series ever published? If yes, attach copy.
X		g. Is the information contained in this series ever analyzed and/or recorded in a summarized report? If yes, attach copy.
X		h. Is there a duplication of this series in your office, or in another office or agency? If yes, where? Jones & Hill.
	X	i. Is this series *(or a major portion of it)* regularly microfilmed?
	X	j. Does the record series result in a computer printout?

11. Retention Requirements The following requires the series to be kept:

a. State Law	____ years.	d. Audit period	____ years.
b. Statute of limitation	____ years.	e. Administrative need	2 years.
c. Federal law	____ years.	f. Federal retention instructions	____ years.

Attach copy or excerpt of laws or regulations. Explain administrative need.

12. Approved Disposition Instructions This agency recommends that the file series be cut off at the end of each:

☒ Calendar Year; ☐ Fiscal Year; ☐ Other ____ then,

- ☒ Hold in the current files area ____ month(s) 1 year(s); then
- ☒ Transfer to local holding area, hold 1 year(s); then
- ☐ Transfer to State Records Center; hold ____ year(s); then
- ☒ Destroy.
- ☐ Transfer to State Archives for permanent retention.
- ☐ Other *(Specify)*

These instructions apply to all prior and future accumulations of the series.

Agency Head/Designee *(Signature)*	Date	Records Management Officer *(Signature)*	Date
C S Stead	10/24/78	Carol Thompson Jr. P.	

Recommendations in paragraph 12 are approved. *(If disapproved, attach letter of explanation.)*

	State Records Committee *(Signature)*	Date
State Auditor/Designee	[illegible]	12-5-78
Secretary of State/Designee	Carroll Hart	12-4-78
Attorney General/Designee	[illegible]	12-5-78