



**ARIZONA STATE
LIBRARY, ARCHIVES AND PUBLIC RECORDS**
A DIVISION OF THE ARIZONA DEPARTMENT OF STATE



Certificate of Compliance

with State Standards for Processing of Permanent Micrographics

(authorized pursuant to ARS § 39-101)

MCN#: _____

Vendor Name (type or print):	Agency or Political Subdivision (type or print):
Address:	Address:
Phone:	Phone:
	Email:
FILM TYPE: <input type="checkbox"/> 16mm Roll <input type="checkbox"/> 35mm Roll <input type="checkbox"/> Fiche <input type="checkbox"/> Jacket	
LIST OF SPECIFIC FILM ROLL NUMBERS or FICHE/JACKET IDENTIFICATION:	
RECORDS SERIES TITLE/RECORD SERIES # FROM RETENTION SCHEDULE & DATE RANGE:	REDUCTION RATIO:
STORAGE LOCATION FOR OFFICIAL SILVER HALIDE MASTER FILM:	
Government entity is responsible for the silver halide master film. If stored at vendor, vendor agrees to turn over film to agency when contract ends, vendor is sold or goes out of business or at agency request.	

It is hereby certified that the above listed silver halide micrographics were processed in accordance with the "Standards for Permanent Records" published by the Arizona State Library, Archives and Public Records. It is further attested that the following equipment and procedures were used:

PROCESSOR MAKE & MODEL:
METHELENE BLUE TEST FOR RESIDUAL THIOSULFATE PERFORMED:
<input type="checkbox"/> DAILY <input type="checkbox"/> BI-WEEKLY <input type="checkbox"/> WEEKLY <input type="checkbox"/> OTHER

*PLEASE ATTACH ANY ADDITIONAL INFORMATION OR SCHEDULE ITEMS

Vendor Contact Name (type or print):	Records Officer (type or print name):
Signature:	Records Officer Signature:
Date:	Date:

Polly Rosenbaum State Archives and History Building

1901 W. Madison St. • Phoenix, Arizona 85009 • Home Page: <http://www.azlibrary.gov/records>

Phone: (602) 926-3820 • E-Mail: records@azsos.libanswers.com



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INSTRUCTIONS

1. In the top portion of this form, enter the vendor contact information and the agency or political subdivision contact information and MCN# (provided on the approved Request for Microfilming of Public Records form).
If you do not know the MCN#, STOP. Please verify at this point that your agency has received permission from the Library, Archives and Public Records to image documents and have an approved Request for Microfilming of Public Records form on file.
2. Submit this form to your chosen vendor.
3. Upon completion of microfilming, vendor will sign, date and return form to requesting agency.
4. Agency will complete the form and will type or print their name in the bottom right corner and sign and date the form.
5. Agency will return the completed form to LAPR.

Important Note: Any forms that are incomplete will be returned to the agency.

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