

# RECORDS DISPOSAL CERTIFICATE

TO: Local Records Commission  
Margaret Cross Norton Building  
Springfield, IL 62756  
217-782-7075

APPLICATION #: 19:221  
COUNTY: DeKalb  
FROM: Housing Authority of the County o  
(Agency Division)  
ADDRESS: 310 N. 6th Street  
(Street, P.O. Box)  
DeKalb, IL 60115  
(City, ZIP Code)  
CONTACT TELEPHONE: (815) 758-2692  
CONTACT EMAIL: gpevonka@dekcohousing.com

**Directions:**

1. Fill in all blanks and columns.
2. Application item numbers must be listed in numerical order.
3. Record series titles must be listed as they appear on application.
4. Sign and send certificate to above address sixty (60) days prior to disposal date.
5. Retain records until approved copy is returned.
6. This form can be found online at <http://www.cyberdriveillinois.com/>.

APPLICATION ITEM NO. <u>4</u>	RECORD SERIES TITLE	INCLUSIVE DATES (MONTH/YEAR)	VOLUME OF RECORDS (Cu. Ft. or MB/GB)
7.	Bids, etc. - Unsuccessful bids only	4/2007 - 8/18	1.25 cu.ft.
9.	Budgets and/or Budget Worksheets	04/2013 thru 3/2014	0.5 cu.ft.
10.	Cancelled Checks, Bank Statements and Deposit Slips	04/2013 thru 03/2014	2 cu.ft.
12.	Cash Receipts	04/2018 thru 03/2019	0.5 cu. ft.
14.	Debt Collection Files-7 yrs since settlement or forgiveness	09/1975 thru 08/2014	2.5 cu.ft.
18.	Housing & Urban Development Records	04/2013 thru 03/2014	3 cu. ft.
25.	All TERMINATED employee files have been digitized and are stored in our electronic mangement system which is compliant with the applicable Illinois Administrative Codes	10/1975 thru 08/2021	5.5 cu ft to 1,162MB
25.	Personnel Files - Paper copies of TERMINATED employee's files to be disposed	10/1975 thru 08/2021	5.5 cu.ft.
			Total Volume from all pages
			Cu. Ft. <u>36.75</u>
			MB/GB _____

If any of the above records are microfilmed, I hereby certify that they have been reproduced in compliance with standards given in Sections 4000.50 and 4500.50 of the Regulations of the Local Records Commissions.

If the records are digitized, I certify that they have been reproduced in compliance with standards given in Sections 4000.70 / 4500.70 and will be maintained in compliance with standards given in Sections 4000.80 / 4500.80 of the Regulations of the Local Records Commissions.

Virginia Pevonka  
(Signature required only if records have been microfilmed or digitized)

I hereby certify that, in compliance with authorization received from the Local Records Commission, the records listed above will be disposed of on or after:

Date 9-15-2021  
Signature Virginia Pevonka  
Approved by ILSOS 9-15-2021  
Date \_\_\_\_\_  
Virginia Pevonka - Finance Coordinator  
Print name and title on line above

Prepared by: Virginia Pevonka - Finance Coordinator

**RECORDS DISPOSAL CERTIFICATE  
SUPPLEMENTAL PAGE**

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FROM: Housing Authority of the County of  
(Agency, Division)

APPLICATION ITEM NO.	RECORD SERIES TITLE	INCLUSIVE DATES	VOLUME OF RECORDS (Cu. Ft. or MB/GB)
28.	Public Housing Five Year and Annual Plan	03/2000 thru 03/2014	1 cu.ft.
31.	Section 8 Clients (Client Leases, Contracts, Contract Renewals are not included in this Disposal Request)	09/2010 thru 08/2016	10 cu.ft.
35.	Tenant File (Tenant dwelling leases & ownership opportunity agreements are not included in this Disposal Request)	09/2010 thru 08/2015	10 cu.ft. 3 cu. ft
36.	Time Records	04/2018 thru 03/2019	.50 cu.ft.