Iowa Department of Human Services

FORM REQUEST AND SPECIFICATIONS

Date September 10, 2003 Central File Number									
Central File Number	Form Title								
Requestor's Name						_			
NEW						Cential Fil	e Number		
NEW	Requestor's Name		Unit			Telephone)	DHS Form Number	
Complete This Section for New or Revised Forms Method of Completion: Hand	□ NEW	☐ CONSOI	LIDATED	DISCONTINUED		Quantity R	Requested	Cost Center	
Method of Completion: Hand	REVISED	☐ PRINTING ONLY		Date Need	Date Needed				
Hand	Complete This Sec	ction for Nev	w or Revised F	orms					
Records Management Manual Reference Retention Time Color of Paper Paper: Bond: Size: 8½ x 111 Printing: One Side Si½ x 5½ Flipped Paper Paper: Paper: Bond: Size: 8½ x 5½ Printing: One Side Size: Si½ x 14 Tumbled Tumbled Punching: Tumbled Punching: Tumbled Punching: Tumbled Punching: Holes at Top Left Distance Center to Center: Padding: Fanapart Sets Sheets Padding: Fanapart Sets Sheets Padding: Pads Sets Per pad at: Top Uth Without Backing Pads Sets Division Signoff Disposition of Stock: Use Destroy Blanket Distribution: Yes No Forms Manager's Use Date Da				Rule Citation If Used by Pu		Public	DHS Manual Reference		
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☐ Pads Sets ☐ Left Without Backing Comments Left Without Backing Requestor's Name Division Signoff Disposition of Stock: Use Destroy Name No Forms Manager's Use Comments	Padding:					_	□ V	Vith Backing	
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☐ Approved Quantity Approved Form Manager's Name Date ☐ Disapproved Support Services' Use Only Quantity Ordered Vendor	Forms Manager's	Use							
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Disapproved Support Services' Use Only Quantity Ordered Vendor									
Disapproved Support Services' Use Only Quantity Ordered Vendor									
Quantity Ordered Vendor				Form Manager's Name				Date	
Quantity Ordered Vendor	Support Services' Use Only								
Requisition Number Date Received Quantity Received Cost		Vendor							
	Requisition Number	Date Received		Quantity Received		Cost			

Submit <u>all 3 parts</u> to the Forms Manager. If form is new or revised, send 2 printed samples to the Forms Manager.

470-0050 (Rev. 7/02) Copy 1: Forms Manager Copy 2: Originator Copy 3: Control

Double-Click to Print!

Double-Click to Send!