



BOARD OF REGENTS OF  
THE UNIVERSITY SYSTEM OF GEORGIA

## Appointment of Agency Records Management Officer

<b>Records Management Officer Information</b>		
Name:		
Title:		
Address:		
City:	State: GA	Zip:
Tel:	Fax:	
Email:		

Pursuant to O.C.G.A. § 50-18-94(7) "Designate an agency records management officer who shall operate a records management program", I hereby appoint the above named individual to be the agency's Records Management Officer.

Agency Name:	
Authorizing Officer's Signature:	Date:

<b>Authorizing Officer's Information</b>		
Name:		
Title:		
Address:		
City:	State: GA	Zip:
<i>Optional</i>		
Tel:	Fax:	
Email:		