CLASSIFIED MATERIAL DESTRUCTION RECORD

1. DATE *(YYYYMMDD)*	**2. MILITARY DEPARTMENT OR AGENCY NAME**
3. OFFICE SYMBOL OR COMPONENT NAME	**4. TELEPHONE NUMBER** *(Include Area Code)*

5. NUMBER OF BAGS
(NOTE: There is a ten (10) pound weight limit per bag.)

a. NUMBER OF UNCLASSIFIED BAGS	
b. NUMBER OF CONFIDENTIAL BAGS	
c. NUMBER OF SECRET BAGS	
d. NUMBER OF TOP SECRET BAGS	
e. NUMBER OF SCI BAGS	
f. TOTAL NUMBER OF BAGS	0

g. REMARKS

6. NAME OF DELIVERY PERSON(S) *(Delivery person be cleared at the same level of, or higher than the material delivered.)*

7. RECEIVED BY *(To be completed by incinerator plant personnel/driver)*

DEPARTMENT OF DEFENSE CLASSIFIED WASTE FACILITY
425 OLD JEFFERSON DAVIS HIGHWAY
ARLINGTON, VA 22202

TELEPHONE:
(703) 695-1828 or (703) 695-2265