

**INSTRUCTIONS:** Use this form only as a continuation of information on MRP Form 401.

1. AGENCY, PROGRAM, STAFF/OFFICE

2. FILE SUBJECT/TYPE	3. FILE FORMAT P – Paper E – Electronic	4. LOCATION	5. FILE NUMBER (From the APHIS Records Management Handbook or General Records Schedule (GRS))	6. RETENTION PERIOD
<u>EXAMPLE</u> - Vaccination (FY)	E	Vaccination Folder on the I - Drive	ADIS 5-1	10 years after cutoff