Archival Records Inventory Form

AMERICAN PSYCHOLOGICAL ASSOCIATION

Note: Please send a copy of this form by email to Jay Staton at astaton@apa.org and retain a copy of this form for your office files.

1. Name/Location of Office & Program Number	For Archives Use only
2. Person Preparing Statement	Accession Number
3. Telephone/Email	Date Received Mo./Day/Year
4. Number of Containers	Received By
5. Title/Date of Records	Location
6. Special Conditions	

RECORDS INVENTORY

Box/Container No.	Folder/Item No.	Description of Contents

Use additional sheets if necessary