Instructions for Completing Form SLR 512
Records Management Policy and Declaration of Compliance
By an Elected County Official

Part 1:

• **Name of County and Elective Office:** Print or type the county name and elective office title (e.g. “Cowboy County Clerk” or “Boot County Constable #4”).
• **Name of Officeholder:** Print or type elected official’s name (e.g. “John Doe”).
• **Mailing Address, City, Zip Code:** Print or type the official mailing address of the elective office.
• **Business email:** Print or type elected official’s email address. Do not provide a personal email address.
• **Phone:** Print or type the elected official’s phone number.
✓ Check the box if you would like to subscribe to The Texas Record blog/newsletter (sent via email). Leave blank if you would not like to subscribe.

Part 2:

Choose only **one** option:

• Elected official will serve as Records Management Officer (RMO)
  ✓ **Check the box to indicate that elected official will serve as RMO.**
  o **Name and Title of Designated Countywide RMO:** LEAVE BLANK
  o **Countywide RMO Signature:** LEAVE BLANK
  o **Elected County Officer Signature:** Elected official signs name in wet ink

-OR-

• Elected official will designate a pre-established countywide RMO
  ✓ **Check the box to indicate that elected official will participate in a countywide program**
  o **Name and Title of Designated Countywide RMO:** Print or type name and job title of countywide RMO
  o **Countywide RMO Signature:** Countywide RMO signs name in wet ink
  o **Elected County Officer Signature:** Elected official signs name in wet ink

Part 3:

✓ Check boxes for any retention schedules to be adopted in addition to Schedule GR.
  o A list of recommended schedules can be found at [https://www.tsl.texas.gov/sites/default/files/public/tslac/slrm/pubs/rec-localschedules.pdf](https://www.tsl.texas.gov/sites/default/files/public/tslac/slrm/pubs/rec-localschedules.pdf)
• **RMO Name and Title:** Print or type name and title of individual serving as RMO (e.g. “John Doe, County Clerk”).
  o Note: If elected official will serve as his or her own RMO, the elected official must complete Part 3. If Countywide RMO was selected in Part 2, the Countywide RMO must complete Part 3.
• **RMO Signature:** RMO signs name in wet ink.
• **Date:** Print or type date form was signed.

**Mail original, signed form within 30 days of RMO change to:**
State and Local Records Management Division
Texas State Library & Archives Commission
P. O. Box 12927
Austin, Texas 78711-2927

Please address any questions relating to completion of this form to slrinfo@tsl.texas.gov or call 512-463-7610

SLR 512
Rev. 02/20