

**RECORDS MANAGEMENT COMPLIANCE STATEMENT  
Fiscal Year 2016-2017**

Agency ID: N0000164

<b>Section I Compliance Certification</b>	<p>1. This agency is in compliance with Section 257.36(5), <i>Florida Statutes</i>,<sup>1</sup> and Rule 1B-24.003(9), <i>Florida Administrative Code</i>,<sup>2</sup> for all public records regardless of medium or format (e.g., paper; electronic, including email; microfilm; audio; video; etc.).</p> <p align="center"><input checked="" type="checkbox"/> Yes   <input type="checkbox"/> No (Unmarked responses will be recorded as not in compliance.)</p> <p>2. This agency disposed of <u>95.50</u> cubic feet of records during the fiscal year indicated above.</p> <p>3. This agency disposed of records in electronic form during the fiscal year indicated above.</p> <p align="center"><input type="checkbox"/> Yes   <input checked="" type="checkbox"/> No (It is not necessary to indicate volume of electronic records disposed.)</p> <p>4. <input type="checkbox"/> Check here if you would like to be contacted for assistance. Indicate your questions/areas of concern on the reverse side of this form.</p> <p>Agency Head Signature: _____ Date: _____</p> <p>Name of Agency Head (please print): <u>Peter D. O'Bryan</u></p> <p>Title of Agency Head (please print): <u>Chairman, Board of County Commissioners</u></p>
<b>Section II Agency Information</b>	<p>Please indicate changes to <b>Agency Information</b> on the lines provided on the right.</p> <p align="center"><u>Current Information:</u> <i>Please do not erase or cover information below.</i> <span style="float:right;"><i>Indicate changes or additions on the lines below.</i></span></p> <p><b>Agency Name:</b> Indian River County Emergency Services District _____</p> <p><b>Agency Head:</b> Mr. Joseph E. Flescher <span style="float:right;"><u>Peter D. O'Bryan</u></span></p> <p><b>Address:</b> 1801 27th Street _____ Building A _____ Vero Beach, Florida 32960-3388 _____</p>
<b>Section III RMLO Information</b>	<p>Section 257.36(5)(a), <i>Florida Statutes</i>,<sup>1</sup> <b>requires</b> public agencies to designate a Records Management Liaison Officer (RMLO). Please indicate changes to <b>RMLO Information</b> on the lines provided on the right. If Current Information is blank, please designate an RMLO for your agency on the lines provided on the right.</p> <p align="center"><u>Current Information:</u> <i>Please do not erase or cover information below.</i> <span style="float:right;"><i>Indicate changes or additions on the lines below.</i></span></p> <p><b>RMLO:</b> Ms. Doris E. Roy _____</p> <p><b>Address:</b> 1801 27th Street _____ Building A _____ Vero Beach, FL 32960-3388 _____</p> <p><b>Phone:</b> (772) 226-1408      <b>Ext.:</b> _____</p> <p><b>Email:</b> <u>droy@ircgov.com</u> _____</p>

<sup>1</sup>Section 257.36(5), *Florida Statutes*: "For the purposes of this section, the term 'agency' shall mean any state, county, district, or municipal officer, department, division, bureau, board, commission, or other separate unit of government created or established by law. It is the duty of each agency to: (a) Cooperate with the division in complying with the provisions of this chapter and designate a records management liaison officer. (b) Establish and maintain an active and continuing program for the economical and efficient management of records."

<sup>2</sup>Rule 1B-24.003(9), *Florida Administrative Code*: "Public records may be destroyed or otherwise disposed of only in accordance with retention schedules established by the Division. Photographic reproductions or reproductions through electronic recordkeeping systems may substitute for the original or paper copy, per Section 92.29, *F.S.*, Photographic or electronic copies. . . . Prior to records disposition, agencies must ensure that all retention requirements have been satisfied. For each record series being disposed of, agencies shall identify and document the following: 1. Records retention schedule number; 2. Item number; 3. Record series title; 4. Inclusive dates of the records; 5. Volume in cubic feet for paper records; for electronic records, record the number of bytes and/or records and/or files if known, or indicate that the disposed records were in electronic form; and 6. Disposition action (manner of disposition) and date."

Please complete and return this compliance statement by **December 29, 2017** (submit **one copy only**, please) to:

Department of State  
Records Management Program, Mail Station 9E      **OR**      [recmgt@dos.myflorida.com](mailto:recmgt@dos.myflorida.com)  
Tallahassee, FL 32399-0250