

Transmittal/Recall Acknowledgement of a Controlled Document

Form Number:
6.2-2
Page 1 of 1

Date _____

To _____ Org _____

From: Document Control

Document ID _____ Revision _____

Document Title _____

Number of Pages _____

Control Number _____

Instructions:

This is a new controlled document.

This is a new controlled document replacing _____ Revision _____
(which is now considered recalled). Discard the recalled document or prominently mark as "Recalled"
place in a location separate from other controlled documents)

This document supersedes _____ Revision _____

Discard the superseded document or prominently mark as "Superseded" and place in a location separate
from the most current, active controlled document.

The EMCBC Staff is recalling this document. Discard the recalled document or prominently mark as
"Recalled" and place in a location separate from other controlled documents.

Please check all that apply, sign and date.

I acknowledge receipt of this document.

I have performed the above action(s) and, if applicable, superseded/recalled documents have been
discarded or marked "Superseded/Recalled" and placed in a location separate from other controlled
documents

I do not require this document; please remove me from distribution. Document has been destroyed

Signature

Date

Please return this form by _____ To: _____