

# Bulk Storage Form

<b>Secretary's Name:</b>	<b>Code A</b>	<b>Secretary's Room No:</b>	<u>PH03</u>
<b>Partner's Name:</b>	<u>SLE</u>	<b>Date sent to Archives:</b>	<u>07/05/08</u>

<b>Box Number:</b>	<b>X-Range – From:</b>	<b>To:</b>
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Client & Matter Number:	Client Name:	Client Matter Details: (and any other information required for identification in the future)	File Review or Destruction Date:	X Number: (to be completed by File Room)
00492.15579	General Medical Council	Dr Barton – Box 14		
	✓	Medical Records of Silvia Tiller Microfilm medical records.	✓	
	✓✓	Silvia Tiller paper medical records.	✓	
	✓	Mary Ann Cox medical records.	✓	
	✓	James Corke medical records.	✓	
	✓	Margaret Burt medical records.	✓	

(TAB THROUGH TO ADD MORE ROWS TO THE TABLE IF REQUIRED, DELETE SURPLUS ROWS)

<b>ARCHIVES ONLY - Form completed on:</b>	<b>By:</b>
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**GENERAL MEDICAL COUNCIL****DR BARTON 00492.15579**

SLE/TET

*Box 14*

1. Medical records of Silvia Tiller microfilm medical records.
2. Silvia Tiller paper medical records.
3. Mary Ann Cox medical records.
4. James Corke medical records.
5. Margaret Burt medical records.