

Bristol Warren

REQUEST FOR AUTHORIZATION TO DISPOSE OF EQUIPMENT

SCHOOL _____
DEPARTMENT _____

CHECK ONE: TRADE-IN _____ SALE _____ LOSS _____ TRANSFER _____ OTHER _____
FROM: _____ TO: _____

Tag No.	Description (Include Model Number)	Serial No.	Date Acquired	Recorded Cost/Value	Sale/Trade-in Amount

REASON FOR DISPOSITION: _____

SIGNATURE _____ DATE _____
Department Head/Principal

SIGNATURE _____ DATE _____
Board Authorized Agent

Deleted from GFA listing by _____ DATE _____