

REQUEST FOR DISPOSAL OF CAPITAL ASSET ITEMS

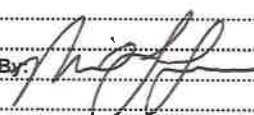
Name of Individual Requesting Disposition: H. Bailey Building: Russell Location of Items: Storage Container

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Description of Property including Brand & Serial #	District Tag #	Date Acquired	Purchase Price	Replacement Price	Qty	Total Cost	Disposal: Please Indicate Method
						(5) x (6)	Selling: Competitive Bid Process
						Donation: List Organization	Other: List Means and/or Place
Outdated math curriculum Student and teacher materials.							
Outdated Social Studies Curriculum							
Outdated reading curriculum.							
Total Items and Cost of Disposal:							

Required Signatures (if applicable)

Principal: H. Bailey Date Approved: 3/2/18

Technology: _____ Date Approved: _____

Request Approved? Yes No Date Approved: _____ Approved By: 

*If denied, recommended action:

To Operations for Equipment Removal Date: _____

To District Office to Remove from Inventory Date: _____