

**Parkrose School District #3**

**Agenda Item # \_\_\_\_\_**

<b>SUBMITTED BY:</b> MARY LARSON	( ✓ )	<b>DATE</b> 5/26/09
<b>APPROVED BY:</b> Building Administrator	( )	
Superintendent Karen Gray	( X )	5/26/09
Director of Business Services Mary Larson	( X )	5/26/09

**TOPIC: DISPOSAL OF SURPLUS PROPERTY**

**PURPOSE OF AGENDA ITEM: [Why are you asking for Board review]:**

Information \_\_\_\_\_ Policy Change \_\_\_\_\_ Action/Approval  X  Presentation/Special Request \_\_\_\_\_

**BACKGROUND:** Attachments:  Y X   N  **LIST:** REQUEST FOR DISPOSAL OF ITEMS

**RATIONALE/DISCUSSION:**

Attached is a listing of surplus property from Russell, Prescott and Parkrose High School(s). The items from these schools are no longer usable. Upon board approval, the items will be disposed of.

**FINANCIAL IMPLICATIONS:**

There could be a minimal revenue source if any of the listed equipment can be sold. Any revenue received will be credited to the General Fund under Miscellaneous Revenue.

**RELATION TO GOALS:**

This request for action is in accordance with Parkrose School District Policy DN and Administrative Rule DN-AR.

**ACTION REQUESTED:**

Board approval to declare the attached list of property to be disposed of as prescribed in Policy DN.

REQUEST FOR DISPOSAL OF CAPITAL ASSET ITEMS							
Name of Individual Requesting Disposition: <i>Malcolm Oliver</i>		Building: <i>PERKINS</i>		Location of Items: <i>STAGE</i>			
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
<del>XXXXXXXXXXXX</del>	<i>NONE</i>						Disposal: Please Indicate Method
						Total Cost	Selling: Competitive Bid Process
Description of Property including Brand & Serial #	District	Date	Purchase Price	Replacement Price	Qty	of Disposition (5) x (6)	Donation: List Organization
	Tag #	Acquired					Other: List Means and/or Place
<i>29 - HERE'S LOOKING AT YOUR MEDICAL KITS THEY'VE BEEN SINCE 2000 THEY ARE NOT USED I WOULD LIKE THEM REMOVED. ASAP THANKS MALCOLM</i>	<i>8</i>	<i>UNKNOWN</i>	<i>UNKNOWN</i>	<i>UNKNOWN</i>	<i>29</i>		<i>OTHER</i>
<div style="border: 1px solid black; padding: 10px; background-color: #e0e0e0;"> <p>OK TO DISPOSE OF THESE PER KATHY KEIM ROBINSON 5-9-09</p> </div>							
Total Items and Cost of Disposal: <i>UNKNOWN</i>							
Required Signatures (if applicable)							
Principal: <i>Michael J.</i>		Date Approved:					
Technology:		Date Approved:					
Request Approved? Yes <input type="checkbox"/> No <input type="checkbox"/>		Date Approved:		Approved By:			
*If denied, recommended action:							
To Operations for Equipment Removal		Date:					
To District Office to Remove from Inventory		Date:					

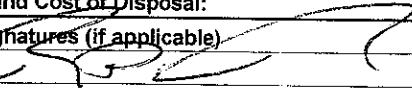
# Russell Academy

Parkrose School District #3

REQUEST FOR DISPOSAL OF CAPITAL ASSET ITEMS							
Name of Individual Requesting Disposition:			Building:			Location of Items:	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Jon Sanders							Disposal: Please Indicate Method
						Total Cost	Selling: Competitive Bid Process
Description of Property including Brand & Serial #	District Tag #	Date Acquired	Purchase Price	Replacement Price	Qty	of Disposition (5) x (6)	Donation: List Organization Other: List Means and/or Place
48" Round Table	Surplus				4		Donate to other schools in district
24" wood grained desks/Broken Legs, chipped/graged Top					10		Garbage
24" wood grained desks / Good Condition					50		Donate to other schools in distr
48" Wood Tables (Wingsgarten)	Non adjustable				4		Donate to other schools in distr.
Total Items and Cost of Disposal:					68	0	
Required Signatures (if applicable) <i>Jon Sanders</i>							
Principal: <i>Debra Ebert</i>	Date Approved:						
Technology:	Date Approved:						
Request Approved? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Date Approved:				Approved By:		
*If denied, recommended action:							
To Operations for Equipment Removal	Date:						
To District Office to Remove from Inventory	Date:						

Please forward white and yellow copies to District Office for Board Approval. Pink copy for your file.

Parkrose School District #3

REQUEST FOR DISPOSAL OF CAPITAL ASSET ITEMS							
Name of Individual Requesting Disposition: <b>SANJAY BEDI</b>		Building: <b>HIGH SCHOOL</b>		Location of Items: <b>SHELLED-OUT AREA</b>			
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Description of Property including Brand & Serial #						Total Cost of Disposition	Disposal: Please Indicate Method
District Tag #	Date Acquired	Purchase Price	Replacement Price	Qty	(5) x (6)	Selling: Competitive Bid Process	Donation: List Organization
						Other: List Means and/or Place	
4 Universal Gym Weight Machines						0	1. Call a metal recycling place to pick up.  2. Use District vehicle to take the items to Metro Metals and recycle
Total Items and Cost of Disposal:							
Required Signatures (if applicable)							
Principal: 		Date Approved: 4/23/09					
Technology:		Date Approved:					
Request Approved? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Date Approved:		Approved By:			
*If denied, recommended action:							
To Operations for Equipment Removal		Date:					
To District Office to Remove from Inventory		Date:					

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