

REQUEST FOR DISPOSAL OF CAPITAL ASSET ITEMS							
Name of Individual Requesting Disposition: <i>Tom Dufresne</i>		Building: <i>Middle School</i>		Location of Items: <i>CUSTODIAL Rm</i>			
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
							Disposal: Please Indicate Method
							Selling: Competitive Bid Process
							Donation: List Organization
							Other: List Means and/or Place
Description of Property including Brand & Serial #	District Tag #	Date Acquired	Purchase Price	Replacement Price	Qty	Total Cost of Disposition (5) x (6)	
<i>Honda buffer</i>					<i>1</i>		<i>Not working</i>
<i>36" Graco scrubber</i>					<i>1</i>		<i>not working</i>
<i>26" scrubber</i>					<i>1</i>		<i>Broken</i>
<i>2 36" volt chargers</i>					<i>2</i>		<i>NO NSGD</i>
Total Items and Cost of Disposal:							
Required Signatures (if applicable) <i>Tom Dufresne</i>							
Principal:				Date Approved:			
Technology:				Date Approved:			
Request Approved? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				Date Approved:		Approved By: <i>[Signature]</i> <i>10/12/17</i>	
*If denied, recommended action:							
To Operations for Equipment Removal				Date:			
To District Office to Remove from Inventory				Date:			