

[illegible]

Technology

School Department / Program

Signature of Principal / Manager

Date _____

Casey Ch

Signature of Fiscal Services Administrator

Date _____

Date approved by the Board of Trustees

Inventory records updated

For Maintenance & Operations Use Only



Disposal

**Transferred to**

(School/Department)

Storage

Other

White copy: Fiscal Services

Yellow Copy: FS will send back to School / Department

Pink copy: M & O