

Equipment/Textbook Disposal Request

Date: 7.31.2023

Employee Name: Leslie Desin (Custodian)

Room Number: —

Building: Ledgebrook High School

**Equipment Disposal:**

Please state the problem you are experiencing with the equipment:

Item no longer used. Broken top.

<u>1</u>		<u>Computer desk</u>	<u>06118</u>	<input checked="" type="checkbox"/> Direct Disposal <input type="checkbox"/> GovDeals
Quantity	Brand Name	Model/Description	Inventory Tag Number	
				<input type="checkbox"/> Direct Disposal <input type="checkbox"/> GovDeals
				<input type="checkbox"/> Direct Disposal <input type="checkbox"/> GovDeals

**Textbook Disposal:**

				<input type="checkbox"/> Direct Disposal <input type="checkbox"/> GovDeals
Date of Edition	Quantity	Publisher	Name of Book	
				<input type="checkbox"/> Direct Disposal <input type="checkbox"/> GovDeals
				<input type="checkbox"/> Direct Disposal <input type="checkbox"/> GovDeals

For Office Use Only

\_\_\_\_\_  
Date of Approval Board of Education

\_\_\_\_\_  
Date of Disposal

**Equipment/Textbook Disposal Request**

Date: 7/13/23

Employee Name: Rajena Woodworth

Room Number: \_\_\_\_\_

Building: EDGEWOOD

**Equipment Disposal:**

Please state the problem you are experiencing with the equipment:

OBSOLETE

<u>3</u> Quantity	<u>Buhl OVERHEADS</u> Brand Name	<u></u> Model/Description	<u>00941</u> <u>00729</u> <u>12068</u> <u>12049</u> Inventory Tag Number	<input checked="" type="checkbox"/> Direct Disposal <input type="checkbox"/> GovDeals
<u>1</u> Quantity	<u>Buhl OVERHEADS</u> Brand Name	<u></u> Model/Description	<u></u> Inventory Tag Number	<input checked="" type="checkbox"/> Direct Disposal <input type="checkbox"/> GovDeals
<u>2</u> Quantity	<u>travel GRAPH</u> <u>ELMO</u> Brand Name	<u>L-101</u> <u>HPL3550H</u> Model/Description	<u>00571</u> <u>06173</u> Inventory Tag Number	<input checked="" type="checkbox"/> Direct Disposal <input type="checkbox"/> GovDeals

**Textbook Disposal:**

<u></u> Date of Edition	<u></u> Quantity	<u></u> Publisher	<u></u> Name of Book	<input type="checkbox"/> Direct Disposal <input type="checkbox"/> GovDeals
<u></u> Date of Edition	<u></u> Quantity	<u></u> Publisher	<u></u> Name of Book	<input type="checkbox"/> Direct Disposal <input type="checkbox"/> GovDeals
<u></u> Date of Edition	<u></u> Quantity	<u></u> Publisher	<u></u> Name of Book	<input type="checkbox"/> Direct Disposal <input type="checkbox"/> GovDeals

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Date of Disposal

**Equipment/Textbook Disposal Request**

Date: 7/13/23

Employee Name: Rajena Woodworth

Room Number: \_\_\_\_\_

Building: EDGEWOOD

**Equipment Disposal:**

Please state the problem you are experiencing with the equipment:

BROKEN NO INVENTORY STICKER - NO MODEL NUMBER

<u>1</u> Quantity	<u>QUARTET MOVIE SCREEN</u> Brand Name	<u>NONE</u> Model/Description	<u>NONE</u> Inventory Tag Number	<input checked="" type="checkbox"/> Direct Disposal <input type="checkbox"/> GovDeals
_____ Quantity	_____ Brand Name	_____ Model/Description	_____ Inventory Tag Number	<input type="checkbox"/> Direct Disposal <input type="checkbox"/> GovDeals
_____ Quantity	_____ Brand Name	_____ Model/Description	_____ Inventory Tag Number	<input type="checkbox"/> Direct Disposal <input type="checkbox"/> GovDeals

**Textbook Disposal:**

_____ Date of Edition	_____ Quantity	_____ Publisher	_____ Name of Book	<input type="checkbox"/> Direct Disposal <input type="checkbox"/> GovDeals
_____ Date of Edition	_____ Quantity	_____ Publisher	_____ Name of Book	<input type="checkbox"/> Direct Disposal <input type="checkbox"/> GovDeals
_____ Date of Edition	_____ Quantity	_____ Publisher	_____ Name of Book	<input type="checkbox"/> Direct Disposal <input type="checkbox"/> GovDeals

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