

LOUDONVILLE – PERRYSVILLE SCHOOL DISTRICT

ITEM DELETION FORM

THIS FORM IS TO BE USED WHEN YOU HAVE AN ITEM THAT NEEDS TO BE DELETED FROM INVENTORY. PLEASE SUBMIT TO THE BUILDING PRINCIPAL AFTER COMPLETING.

DATE _____

TAG # _____

ITEM DESCRIPTION _____

SERIAL # OR MODEL # OF EQUIPMENT _____

LOCATION OF ITEM: Bldg. _____ Room # _____

EMPLOYEE'S NAME _____

REASON FOR DISPOSITION: (CIRCLE ONE)

S – SOLD

ST- STOLEN

D- DESTROYED

PP- PERSONAL PROPERTY

RT- RETAGGED

T – TRADED IN

U – UNREPAIRABLE

DP- DUPLICATED ON INVENTORY

L- LOST EQUIPMENT

PRINCIPAL'S APPROVAL TO REMOVE _____

SUPERINTENDENT'S APPROVAL _____ DATE _____

(TREASURER'S OFFICE USE ONLY)

Cost disposed of _____ Date entered _____