

Disposal of Surplus or Obsolete Materials or Equipment

From Site: MOT
(Current Location)

To Site: MOT
(New Location)

Quantity	Item	Model/Serial Number	MWSD Tag Number	Condition
1	Drill Press	Delta/Rockwell 79	4866	3
1	Drill Press	Delta/Rockwell 11	4961	3
1	Drill Press	Delta/Rockwell	4962	3
1	Table Saw	Delta/Rockwell Ur	4965	3
1	Engraver	Engravograph 822	6086	2
1	Band saw	Delta 103-4579	4964	3
1	Table Saw	Craftsman 113.24	4868	3
1	Wood carving Lathe	Delta/Rockwell	4963	3
1	Stove	GE	6624	2
1	Dryer	Maytag	2431	2
1	Radial Arm Saw	DEWALT	8451	2

 5-30-19
Requesting Administrator Signature & Date

Condition Code
1 - Excellent
2 - Fair
3 - Poor

Approval of Disposal
Authorized Signer Signature & Date
Superintendent/Designee Signature & Date

Board Approval Date

*******For Office Use Only*******
Post Board of Trustees action, Business Office forward completed form to:

_____ Fiscal Services for Asset Mgmt. Once verified asset tags, return to Business Office.
(Asset Mgmt initial)

Department notified disposal approved and recorded.
 _____ Technology/equipment - Technology
 _____ Furniture - MOT
 _____ Other

Signature & Date

Office use only: RECEIVED Received at DO MAY 30 2019
BUSINESS SERVICE