FRANKLIN BOROUGH BOARD OF EDUCATION

OBSOLETE/SURPLUS/DISPOSABLE EQUIPMENT/MATERIALS

DEPT/ GRADE	ARTICLE & DESCRIPTION (INCLUE SERIAL # OR OTHER IDENTIFICATION)	QTY	OBSOLETE/ SURPLUS/ or DAMAGED UNREPAIRABLE	LOCATION FL/RM#	DATE OF PURCHASE (If Known)	FIXED ASSET # (if applicable)	METHOD OF DISPOSAL
	I CERTIFY THAT THE ABOVE IT	EM(S) A	RE NO LONGER RE	QUIRED FOR	SCHOOL USE.		
			Submitte	ed by:			
APPROVA	LS:						
PRINCIPAL/ADMINISTRATOR DATE			DISPOSAL COMPLETED				DATE

DATE

SUPERVISOR-BUILDING AND GROUNDS

DATE

Date Board Approved_____

BUSINESS ADMINISTRATOR