

ALL FIELDS SHOULD BE COMPLETED

**WEBSTER COUNTY SCHOOLS
DISPOSAL ASSET FORM**

REQUEST DATE: _____

ASSET NBR: _____ DESCRIPTION: _____

LOCATION NAME: _____ BLDG: _____ RM: _____

MANUFACTURER: _____

MODEL NBR/NAME: _____ SERIAL NBR: _____

DISPOSAL METHOD Choose One

Junk Fire Stolen Other

Sale Trade In --- Amount \$ _____

DISPOSAL REASON: _____

AUTHORIZATION _____

COMMENTS:

BOARD APPROVAL DATE: _____

Entered by: _____ Date: _____