Greenville PUBLIC SCHOOLS

# FIXED ASSET DISPOSAL FORM

**School/Department Name:** _____

**DATE:** _____

**MUST BE ACCOMPANIED BY AN AGENDA REQUEST FORM WHEN SUBMITTED FOR BOARD APPROVAL**

| GPSD Asset # | Manufacturer/Device Name | Service Tag / Serial Number: | Item Description: | ASSET CONDITION (FILL IN ONE) WORKING OR NON- WORKING |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

**PLEASE NOTE: Items reported stolen must be accompanied by a Lost & Stolen form. (Any questions contact FIXED ASSET CLERK for the Greenville Public School District Larry Lewis II @ llewis@gpsdk12.com**

| PRINT Principal/Director Name | SIGN Principal/Director Name |
|---|---|
| | |

DO NOT WRITE BELOW THIS LINE TO BE COMPLETED BY THE BUSINESS OFFICE.

----------\

**FOR OFFICIAL USE ONLY**

METHOD OF DISPOSAL:

| SOLD | JUNKED | LOST | STOLEN | CATASTROPHE | RETURNED TO VENDOR FOR CREDIT (Write the Replaced by asset # below) |
|---|---|---|---|---|---|
| | | | | | |

OTHER:

BUSINESS MANAGER: _____

AMOUNT OF SALE: _____

DATE OF SALE: _____

**Date Of Approval by School Board:** _____

*ONE COPY – FIXED ASSETS CLERK* *ONE COPY – SCHOOL/DEPARTMENT*

**FORM FA-2**