

2. **Method of Disposal** – please include address and phone number (if applicable):

3. **APPROVAL**

We are authorizing the disposal of the itemized instructional materials/equipment as listed.

Superintendent

Treasurer

4. **DISPOSAL CONFIRMATION**

The above items were disposed of by the designated method.

Name

Date

*****Return this form to Treasurer after disposal is completed*****

IN ACCORDANCE WITH BOARD OF EDUCATION POLICY, THE SUPERINTENDENT IS AUTHORIZED TO DISPOSE OF OBSOLETE INSTRUCTIONAL MATERIALS OR EQUIPMENT.

cc: Superintendent