

**FRANKLIN COUNTY SCHOOL DISTRICT  
FIXED ASSET – DISPOSAL FORM**

I am requesting that the following items be taken off the Franklin County School district fixed asset inventory:  
REASON: \_\_\_\_\_

Bar Code Number \_\_\_\_\_ Location, Bldg. & Room \_\_\_\_\_  
Description \_\_\_\_\_

Bar Code Number \_\_\_\_\_ Location, Bldg. & Room \_\_\_\_\_  
Description \_\_\_\_\_

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Description \_\_\_\_\_

Bar Code Number \_\_\_\_\_ Location, Bldg. & Room \_\_\_\_\_  
Description \_\_\_\_\_

*Please remove all bar code tags from items.*

*I hereby certify that the above listed item (s) will be destroyed and/or junked within 30 days.*

\_\_\_\_\_  
Signature of Person Completing Form

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Principal/Administrator

\_\_\_\_\_  
Date

\_\_\_\_\_  
Fixed Asset Manager

\_\_\_\_\_  
Date Completed

\_\_\_\_\_  
Superintendent/Board Approved

\_\_\_\_\_  
Date Approved