ALBUQUERQUE PUBLIC SCHOOLS

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# MATERIALS MANAGEMENT

SLV 20280

Reset

## SALVAGE/EQUIPMENT (WITHOUT APS NUMBER) REMOVAL AUTHORIZATION FORM

FROM: SITE REMOVAL LOCATION _____ LOC. NO. _____

TO: SITE TRANSFER LOCATION SALVAGE LOC. NO. 700

SITE ADMINISTRATOR _____ DATE: _____

| QUANTITY | DESCRIPTION | UNIT COST |
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LOCATION OF SALVAGE: _____

CONTACT PERSON: _____ PHONE: _____

COMMENTS: _____

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|---|---|---|
| DATE | SIGNATURE OF PRINCIPAL OR CHIEF ADMINISTRATOR RELEASING EQUIPMENT | |
| DATE OF MOVE | SIGNATURE OF DELIVERY OR PICK-UP PERSON | |
| DATE | SIGNATURE OF INDIVIDUAL RECEIVING EQUIPMENT | |

DISTRIBUTION: WHITE-PROPERTY SECTION YELLOW - WAREHOUSE PINK - RELEASING LOCATION GOLD - SUSPENSE FILE