

Date:
Requester Name:
Requester Email:
Department:
Address:
Cost Center Number:

[illegible]

Request for Disposal of Surplus and Unserviceable Property (Excluding Motorized Equipment)

[illegible]**TOTAL**

Surplus Approval: I hereby authorize the items listed above to be handled as indicated.

Requesting Department

Department of Procurement

Department of AIM

Department Head or Designee

Chief Procurement Officer or Designee

AIM Inventory Supervisor or Designee

Date _____

Date _____

Date _____