**SURPLUS REQUEST FORM**

School Name: \_\_\_Spencer County Preschool Program \_

Name: \_\_\_Todd Russell\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department: \_\_\_Preschool\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_10/6/17\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please print this form and email to Michele Barlow for Board approval.**

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| **Item**  | **Qty** | **Reason for Surplus** |
| Art Table/ Easel | 1 | Poor condition |
| Book Shelves | 2 | Poor condition |
| Library Shelves | 2 | Poor condition |
| Storage Cabinet | 1 | Poor condition |
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