

**WASHINGTON COUNTY SCHOOL DISTRICT**  
**INVENTORY REPORT \*\*\* DELETION \*\*\* FORM 402D (Revised)**

Barcode/Asset ID: \_\_\_\_\_

School/Department: \_\_\_\_\_ Room #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Item Description: \_\_\_\_\_

Model: \_\_\_\_\_ Serial #: \_\_\_\_\_

Explanation for Deleting: \_\_\_\_\_

Does the item need to be picked up? YES NO Location of the item: \_\_\_\_\_

Is it a working and/or a useable item? YES NO (If yes, add the colored sticker to item)

Principal/Department Director Approval

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

BARCODE STICKER

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