TOOL DISPOSAL REQUEST FORM

Per OP-040107, Section I. item B., this request is to submit the below listed tools for destruction. The below listed items original purchase price was $500.00 or less.

Facility: _____ Date: _____

ITEM	ITEM #	CLASS	QTY	COMMENT

Disposal Method: _____ Date:_____

Tool Control Officer Signature: _____

Warden/Facility Head Signature: _____

cc: