UNIVERSITY OF MARYLAND EASTERN SHORE
DISPOSAL RELEASE FORM

Department completing form: _____

- Description of Property
  - UMES Barcode Label Number: _____
  - Description of Item: _____
  - Equipment Serial Number: _____
  - Condition:
    - Good ☐
    - Poor ☐
    - Unserviceable ☐
- Department, Building & Room item was removed from:

  _____
- Point of contact in that department: _____
- If item contains a hard drive, was it destroyed? Yes ☐ No ☐ N/A ☐

  If Yes – Witness: _____ Date Destroyed: _____

I authorize the above items to be disposed of as they have minimal to no fair market value.

_____
Approval of Department Head Date

_____
Administrative Affairs Approval Date

I certify that the above item has been removed from the inventory records.

_____
Comptroller's Office Approval Date

Revised August 2012