JOHN JAY COLLEGE
THE CITY UNIVERSITY OF NEW YORK
OF CRIMINAL JUSTICE

FURNITURE DISPOSAL FORM

Date: _____

From: _____ Department: _____

Room No. _____ Telephone No. _____

Description of Furniture to be Disposed	Specify: Wood/ Metal	Qty.

PLEASE EMPTY ALL DRAWERS FROM DESKS AND FILE CABINETS. OTHERWISE PICK UP WILL BE DELAYED.

Approved By Nancy Marshall

Date: _____

Date Work Order Generated: _____