



995 Worthington Street, Springfield, MA 01109
Telephone 413-734-5376 FAX 413-737-7949

Mental Health Association, Inc. & Affiliates
DISPOSAL OF ASSETS REQUEST FORM

SITE REQUESTING DISPOSAL: _____

DATE OF REQUEST: _____

DESCRIPTION OF ASSETS TO BE DISPOSED OF	INVENTORY TICKET # (IF APPLICABLE)	ORIGINAL YEAR OF PURCHASE	ESTIMATED COST

Program Director _____

Director of Finance _____