

### WASTE MATERIALS REPORT

Entity Name : \_\_\_\_\_

Fund Cluster : \_\_\_\_\_

Place of Storage : \_\_\_\_\_ Date : \_\_\_\_\_

**ITEMS FOR DISPOSAL**

Item	Quantity	Unit	Description	Record of Sales		
				Official Receipt		
				No.	Date	Amount
1						
2						
3						
4						
5						
			<b>TOTAL</b>			

Certified Correct :

Disposal Approved :

\_\_\_\_\_  
Signature over Printed Name of Supply  
and/or Property Custodian

\_\_\_\_\_  
Signature over Printed Name of Head of  
Agency/Entity or his/her Authorized  
Representative

**CERTIFICATE OF INSPECTION**

I hereby certify that the property enumerated above was disposed of as follows:

- Item \_\_\_\_\_ Destroyed
- Item \_\_\_\_\_ Sold at private sale
- Item \_\_\_\_\_ Sold at public auction (Name of the Agency/Entity)
- Item \_\_\_\_\_ Transferred without cost to \_\_\_\_\_

Certified Correct:

Witness to Disposal:

\_\_\_\_\_  
Signature over Printed Name of  
Inspection Officer

\_\_\_\_\_  
Signature over Printed Name of  
Witness