

## SYRACUSE UNIVERSITY COMPUTER RECYCLING FORM

REQUISITION NUMBER \_\_\_\_\_ DEPARTMENT \_\_\_\_\_ PICK-UP DATE \_\_\_\_\_

CAMPUS LOCATION \_\_\_\_\_ CONTACT NAME \_\_\_\_\_ PHONE \_\_\_\_\_

USE THIS FORM TO RECYCLE OBSOLETE AND NON-WORKING COMPUTER AND ELECTRONIC EQUIPMENT.  
 TO HONOR THIS DISPOSAL REQUEST AND MEET REGULATORY REQUIREMENTS, PROVIDE ALL INFORMATION REQUESTED.  
 The Purchasing website, <http://purchasing.syr.edu>, contains detailed instructions.

ITEM #	DESCRIPTION	S/N	SU ID	<u>FOR RECYCLER EVALUATION ONLY</u>			
				<u>RESELL</u>	<u>RECYCLE</u>	<u>DATE</u>	<u>INITIAL</u>
1							
2							
3							
4							
5							
6							
7							
8							
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10							
11							
12							

Provide DESCRIPTION, SERIAL NUMBER AND SU INVENTORY NUMBER, if any, for EACH ITEM on this form, and return it with a PURCHASE REQUISITION to Christina Julian, Purchasing Department, Skytop Office Bldg.  
 Phone: 443-2283