CLEAR FORM

(On State/Agency Letterhead)
Turn-in/Disposal Request

Agency Name: **Street Address:** **City, State, Zip:** **ATTN (POC):** **Phone Number:**	**Street Address:** **City, State, Zip:** **Phone number:**
Property Approved by S/C for Turn-in: YES / NO **Property Approved by S/C for Disposal: YES / NO** **Print Name:** **Sign:**	**Turn-in/Disposal approved by LESO: YES / NO** **Turn-in /Disposal completed in LEEDS database: YES / NO** **Remarks:** **Date: _____ LESO Initials: _____**

ITEM Number	**ITEM NAME**	**FILE#**	**NSN**	**DTID**	**DOC#**	**QTY**	**DEMIL Code**
1							
2							
3							
4							
5							
6							
7							
8							
9							

DRMO Accepting Turn-in Requests: _____

REMINDER: Law enforcement agencies must submit requests for Disposals / Turn-ins through their State Coordinators or authorized Points of Contacts.