Oklahoma Department of Corrections Cellular Device Disposal Form

Receive Date		
Name		
Unit		
Telephone Number		
Cellular Provider		
Make and Model		
Inventory Tag Control Number		
IMEI Number/Serial Number		
Equipment Returned with Accessories	□Yes	□No
To be surplused	□Yes	□No
If applicable, reassigned to		
Comments:		
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(R 02/22)