

# MATH KIT ASSIGNMENT FORM

PLEASE KEEP SORTING & MONEY TRAYS

## CURRENT PLACEMENT:

**KIT #**

(located on front of bin)

SCHOOL

TEACHER (owner of position)

If you are an *L.T.O. Supply*, please print your name: \_\_\_\_\_

## SEPTEMBER PLACEMENT:

SAME AS ABOVE

NEW SCHOOL LOCATION:

\_\_\_\_\_

NEW GRADE LEVEL: (Note: One Kit per Teacher) \_\_\_\_\_

RETIRING/DO NOT NEED

TO BE ANNOUNCED

**PLEASE RETURN  
THIS FORM**

**\* INSIDE \***  
**MATH KIT**

**KIT CENTRE USE ONLY:**

*Returned Same:*

*New Kit:*

*Order #:*

OVER ↗