

CONTINUED USE FORM

Date: _____

Agency Name: _____ Contact Person: _____

Project Title: _____ Telephone Number: _____

List Prop. 10 related inventory that will continue to be used for the benefit of Imperial County children ages 0 through 5.

Serial Number	Description	Cost	Date of Purchase

Describe how agency will use listed inventory for the benefit of Imperial County children ages 0 through 5 (attach extra sheet if necessary).

Current Inventory Record Form with detailed information on Inventory must be attached to this form

ICCFCC use only

Approved

Not Approved

Date _____

Initials _____