

**Lowndes County Public Schools
Hayneville, AL
Teacher Textbooks Distribution Form**

School Year _____ School _____ Principal _____
Teacher _____ Room # _____ Grade/ Department _____

Book Title	Usable Inventory	Anticipated Course Enrollment	Number of Copies Requested	Number of Copies Issued *	Total Books Received *	Total Books Returned *

Teacher Signature* _____

Chairperson/Department Head Signature* _____

Principal Signature* _____

*Complete at the end of the school year