



Bayonne Board of Education
Administration Building
669 Avenue A
Bayonne, New Jersey 07002

2025-2026 DAMAGED ITEM FORM

Date: _____

Homeroom: _____

It has been brought to our attention that _____ has damaged or lost the following technology item(s). As the Parent / Guardian, you signed the Acceptable Use Agreement stating that you understood that if your child damaged, lost or had any of the below items stolen, you will be responsible for the cost to replace the item.

The item(s) in question is:

_____ Chromebook or Chrome Tablet - \$50.00

_____ Chromebook or Chrome Tablet Charger - \$10.00

Please make a check out to: Bayonne Board of Education

Receipt of Payment

Student: _____ Check # _____

_____ Chromebook/Chrome Tablet - \$50.00

_____ Charger - \$10.00

Replacement equipment was issued on: _____

Student Signature: _____

Date: _____

Staff Member Signature: _____

Date: _____