

INVENTORY DISPOSITION/TRANSFER REQUEST FORM

<input type="checkbox"/> Fixed Asset Item		<input type="checkbox"/> Supplemental Item		<input type="checkbox"/> Disposition		<input type="checkbox"/> Transfer	
School/Cost Center: _____				Date of Request: _____			
Control Number: _____				Serial Number: _____			
Description: _____				Quantity: _____			
Funding Source: _____				Original/Estimated Cost: _____			
TRANSFER: Change location of the item listed above:							
From: _____				To: _____			
DISPOSITION: Select reason for disposition of asset listed above:							
<input type="checkbox"/> Auction							
Reason for sale of asset:							
<input type="checkbox"/> Obsolete		<input type="checkbox"/> Inoperable		<input type="checkbox"/> Unsafe		<input type="checkbox"/> No Longer Needed	
Office Use: Sale Price \$ _____				Sale Date \$ _____			
<input type="checkbox"/> Trade-In							
Item traded in for: _____							
Office Use: Trade-In Amount \$ _____				Trade-In Date \$ _____			
<input type="checkbox"/> Obsolete							
<input type="checkbox"/> Broken Beyond Repair							
<input type="checkbox"/> Stolen		Police Report Date: _____			Attached: Copy of Police Report		
<input type="checkbox"/> Other		Explain _____					
Comments: _____							
Approved _____				Date Approved _____			
Principal / Administrator							
Approved _____				Date Approved _____			
Federal Programs Director							
<i>Send to Chapter One Center if purchased with Title I, II or III Funds</i>							
Approved _____				Date Approved _____			
Superintendent							
Disposed _____				Board Disposal Date _____			
Central Office Inventory Clerk							
After form is processed, a signed copy will be sent to originating location. DO NOT remove asset before approval. Disposition/Transfer is not approved until this form is received back with all required signatures and Board disposition date.							