

PROPERTY MANAGEMENT DEPARTMENT TRANSFER OF PROPERTY

Sign & send to <u>propertymanagement@leonschools.net</u> when completed to permanently remove equipment from your inventory

Transferred By:		Phone #:	Phone #:	
Person's Name From:				
			Cost Center #:	
Reason:				
☐ A. Transfer to Pro	operty Manageme	nt		
☐ B. Transfer to an	other school/depa	rtment		
			School or Department Name / Cost Center #	Bldg/Room#:
Qty PC Number	Serial Number		Description	
TRANSFERRED BY:			RECEIVED BY: (denotes receipt only)	
Person Requesting Transfer		Date	Signature Of Receiving Person	Date
Transfer Approved By: (***Principal/Administrator Signature)		Date	Name Of Person Signed Form Left With	Date

***Transferring Principal/Administrator certifies that the computer hard drives have been cleaned (DBANNED), drilled or removed.