

PROPERTY TRANSFER

SENDING SCHOOL/DEPARTMENT _____

RECEIVING SCHOOL/DEPARTMENT _____

PRINCIPAL/SUPERVISOR _____

PRINCIPAL/SUPERVISOR _____

Request to transfer property from one accountability officer to another as described below:

BPI NUMBER	(IF AVAILABLE) SERIAL NUMBER	DESCRIPTION	DATE	CONDITION	FROM LOCATION SCHOOL/BLDG/ROOM	TO LOCATION SCHOOL/BLDG/ROOM

I hereby certify that the above is a true and complete statement for the above request. Signature required from both parties.

Principal/Supervisor Signature (District requires a physical signature) Date
Sending

Principal/Supervisor Signature (District requires a physical signature) Date
Receiving

- ⇒ FAX signed form to Property Records: 671-7524
- ⇒ Sending Office: Retain copy for file
- ⇒ Receiving Office: Retain copy for file and FAX with both signatures