Please Complete All Fields

Jordan School District

Equipment Transfer or Surplus Item Declaration

*** Condition Code**
is required on each item beingdeclared as surplus. (A) Good (B) Fair (C) Broken • (D) Not complete unit

Location #_____ School Name_____

Pc #	Qty.	Description	Manufacturer	Model	Serial Number	Asset Number	Code*	Picked-up

Principal's Signature:_____ X____/____/____

Transfer to:
- ☐ School/Dept_____
- ☐ Surplus Center
- ☐ **Traded on New Equipment** (Must have prior approval from Purchasing Dept)

APPROVALS

X_____ Administrator of Schools

X_____ Purchasing Committee

PICKED UP & DELIVERED BY

X_____ Driver's Signature

X_____/_____/_____ Date

DELIVERED TO

X_____ School or Location Name

X_____ Location Number

X_____ Building Number

X_____ Room Number

X_____ Signature of Principal or Dept.

X_____/_____/_____ Date

Directions: SURPLUS ONLY: SEND COMPLETED FORM TO YOUR ADMINISTRATOR OF SCHOOLS. (Make a photo copy for school file)

Fixed Assets will send copy to school when transaction is complete.

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