Process Date
Surplus Only

Jordan School District

Surplus Item Declaration

Condition Code (Required)	
(A) Good	(B) Fair
(C) Broken	(D) Other

Loc # _____ School: _____ Room: _____

Qty	Description	Asset Number	Serial Number	Manufacturer/Model	Code	P/U

Directions: Fill out the above fields for Surplus. Make copy for school file. Send original completed form to Area Administrator. Do not use this form for Transfers.

Surplus will send a pink copy back to the school when transaction is complete.

_____
Principal's Signature / Date

_____
Surplus Signature / Date

_____
Administrator of Schools / Date

_____
Driver Signature / Date