



**PROPERTY MANAGEMENT DEPARTMENT
TEMPORARY REMOVAL OF PROPERTY
(Receipt For Equipment)**

Complete form prior to removal of equipment from your cost center. Removal is on a temporary basis only.

School or Department *Cost Center Number* *Removal Date*

Employee Student Parent Vendor TIS

Individuals Name or Vendor Name Signed Out To

Qty	PC Number	Serial Number	Description
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

The above property is temporarily located at: Purpose of Removal: REPAIR LOAN

Street Address, Apt. # *Contact Phone #*

City, State, Zip *Expected Return Date*

Printed Name of Recipient *Signature of Recipient/*

- My signature on this form affirms my agreement to abide by LCSB Policy 7530 including elements of the policy listed below.
- The staff member who has signed for the property agrees to provide reasonable care, custody and control over the property.
 - In case of loss, a police report shall be required that indicates no negligence on the part of the employee.
 - In case of loss from a vehicle or home, the borrower agrees to submit a claim to their insurance as primary with the district to reimburse the employee’s deductible if no negligence is found
 - In all other cases of damage or loss or “mysterious disappearance” liability responsibility rests with the borrower to replace or have repairs made to the affected property in case of loss or damage.

Administrator’s Signature for Approval *Date*