

**PROPERTY MANAGEMENT DEPARTMENT
TRANSFER OF PROPERTY**

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

Transferred By: _____ Phone #: _____
Person's Name

From: _____ Cost Center #: _____
School or Department Name

Reason: _____

☐ A. Transfer to Property Management

☐ B. Transfer to another school/department _____
School or Department Name / Cost Center # Bldg/Room#:

| Qty | PC Number | Serial Number | Description |
|-------|-----------|---------------|-------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

TRANSFERRED BY:

Person Requesting Transfer

Date

Transfer Approved By:
(**Principal/Administrator Signature)

Date

RECEIVED BY: (denotes receipt only)

Signature Of Receiving Person

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.**