

Spring Independent School District Asset Transfer / Acceptance and Moving of Equipment

**ATTACH COMPLETED
FORM TO
SCHOOLDUDE WORK
ORDER.**

Date: _____

Fixed Assets Form # (optional): _____

Is item classified as a Fixed Asset (\$5000 or more)

Yes No

Location From: _____

Location To: _____

TRANSACTION TYPE:

Permanent Transfer: Yes No Stolen, Destroyed: Yes No

Temporary Transfer: Yes No Gift / Other: Yes No

IF A TEMPORARY MOVE, COMPLETE THIS BOX
Approximate Period: _____
Estimated Value: \$ _____
Date: _____

District Tag or Serial Number	Description	Manufacturer	Model Number	Defective Item	Qty
				<input type="radio"/> Yes <input type="radio"/> No	
				<input type="radio"/> Yes <input type="radio"/> No	
				<input type="radio"/> Yes <input type="radio"/> No	
				<input type="radio"/> Yes <input type="radio"/> No	
				<input type="radio"/> Yes <input type="radio"/> No	
				<input type="radio"/> Yes <input type="radio"/> No	
				<input type="radio"/> Yes <input type="radio"/> No	

NOTES:

Sending Location Approval: _____ Date: _____

To be picked up by: Technology Dept. Maintenance Dept. Date: _____

Receiving Location Signature: _____ Date: _____