MOSS POINT SCHOOL DISTRICT

Transfer of Property

Date: ______________________________

Asset Number	Description	Serial Number	Reason for Transfer

The following signatures authorize the transfer of this equipment. SUBMIT this form to the District Property Manager after it has been completed in full and signed by both department administrators.

TRANSFERRING DEPARTMENT

________________ ____________________ ____________________

Building Room Number Administrator Signature

RECEIVING DEPARTMENT

________________ ____________________ ____________________

Building Room Number Administrator Signature

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FINANCE DEPARTMENT USE ONLY

If transferring to the Technology Department, please check the reason:

☐ Long Term Repair ☐ Disposal Due To: __________________________

Technician's Signature: ____

Employee's Signature: ____

District Property Officer: ______________________________________ Date: ________________