## **INVENTORY TRANSFER FORM**

## I. TRANSFERS

			r
·	tive store	Destroyed	**Stolen
*Describe what is wrong			
* 📄 in working conditi	on no longe	r in working condition	ו
<ul><li>Item must be reported t</li><li>District Police</li></ul>	o: , Chief Financial Officer	r and Fixed Assets De	epartment
TRANSFERRED FRO	M: (to be completed	l by person transfe	erring the fixed asset)
1. Item Description			2. Qty
3. Barcode Number (white SFDRCISD tag)	4.	tem Serial Number	
5. Campus / Location	6. E	Building Code Letter	7. Room Number
TRANSFERRED TO:			
1. Campus / Location	2. E	Building Code Letter	3. Room Number
	Oria	inator	DATE
II. AUTHORIZATIONS:			DATE
Transfer Approved By:			
	ADMINISTRATOR	TITLE	DATE
Transfer Received By:			
	ADMINISTRATOR	TITLE	DATE
	III. Picked up By:		
		Warehouse Cler	K DATE