LAKE-SUMTER STATE COLLEGE

PROPERTY RELOCATION/WRITE-OFF FORM

All shaded boxes must be filled in.
Property Manager's signature always required.

	PTAG	DESCRIPTION	MODEL	MANUFACTURER	SERIAL NUMBER

	CUSTODIAN: Name and X-ID	CAMPUS	BUILDING	ROOM
Current:				

RELOCATION	CUSTODIAN: Name and X-ID	CAMPUS	BUILDING	ROOM
New:				

Relocation approval: _____

Property Manager signataure — Date

New Property Manager acceptance: _____

Sign if applicable — Date

WRITE-OFF	REASON	CONDITION	DISPOSITION METHOD	DAMAGED, LOST/MISSING, or STOLEN
				Must attach Investigative Report
		New	Return	
		Used	Trade	
		Good	Auction	
		Fair	Cannibalize	
		Poor	Donate	
		Obsolete	Discard	

Write-Off approval: _____

Property Manager signature — Date

Property records revised to reflect relocation.
Property records coded as SURPLS, added to write-off list for Board approval.

Records Keeper signature — Date