RICHLAND COUNTY SCHOOL DISTRICT ONE
EQUIPMENT TRANSFER

FROM _____ (DATE) _____

TO _____ ☐ Temporary Transfer

Transfer Authorized By _____ (Print Name) _____ Signature ☐ Permanent Transfer

IDENTIFICATION NUMBER (TAG -)	ROOM/AREA (FROM)	ROOM/AREA (TO)	QUANTITY	DESCRIPTION ITEM NAME, MANUFACTURER, DIMENSION REMARKS	SERIAL NUMBER	DATE ACQUIRED Yr.	Mo.	ACQUISITION COST

MOVEMENT DESIGNATION _____ In-District _____ Storage (Bldg. 435) _____ Disposal

MOVEMENT CONTROL REPRESENTATIVE _____ (Print Name) _____ Signature _____ Date

I hereby accept responsibility for the above listed items _____ (Print Name) _____ Signature _____ Date

Form Distribution:

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SHIP/REC	Retain YELLOW copy and forward original copy to:
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