

MAURY COUNTY PUBLIC SCHOOLS EQUIPMENT INVENTORY ACTION REQUEST

EACH ITEM WITH A MCPS INVENTORY NUMBER MUST BE ON A SEPARATE FORM

School Location No. _____ Acquisition Date _____

Property Custodian _____ Purchase Order No. _____

User/Code _____ Cost _____
(ie. Title I, etc.)

Request Completed By _____ *** Invoice Must Be Attached If Applies**

Instructions: Mark an "X" on the appropriate line below for type of action requested and attach all other information as required.

_____ New Inventory _____ Dismantle for Parts _____ Scrap or Surplus
(Tag No. Required) (Approval Required) (Approval Required)

_____ **Interdepartmental Transfer _____ Theft Report _____ * **Location Change
(Between departments or rooms) (Attach police report) (Between School/Locations)

_____ Other (Explain) _____

Item/Description: _____

Make/Model: _____

Serial No: _____ Room No: _____

MCPS Inventory No: _____ School Inventory No: _____

Condition of equipment _____

**** If Interdepartmental Transfer Is Checked:**

From (Department/Room): _____

To (Department/Room): _____

***** If Location Change Is Checked:**

From: (School/Location No.) _____

To: (School/Location No.) _____

Signature and Date of Person Responsible for Receiving Items:

(Signature Required)

(Date Required)

For Central Office Use Only:

Authorized Signature

(Entered into Database)

(Date Request Completed)