



CANYONS
School District
Equipment Surplus

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Pickup Room #: _____

Prepared By: _____

School Name: _____

Location #: _____

Quantity	Description	Manufacturer	Model	Serial Number	Asset Number	Picked Up	**Code	**Condition Code
								(A) Good Not Needed
								(B) Fair / Repairable
								(C) Broken / Unrepairable
								(D) Good / Obsolete
								(E) Parts Not Available
								(F) Not Complete Unit
								(G) Unknown
								(H) Other
								Notes:

Surplus Warehouse Traded for New Equipment (Must have prior approval from Purchasing Department)

Principal's Signature: _____ Date: ____/____/____

**Condition Code is required on each item being declared as surplus

School Initial: _____ (Picked up from school)

X _____

Driver Signature

Date

*** Directions: 1: Principals should assure that this form has been completed properly and signed. (*Make a photo copy for school file*)

2: Fixed Assets will then have declared items picked up and removed from inventory.

Fixed Assets Only

Fixed Asset Received: Initial _____ Date: ____/____/____

Completed: Initial _____ Date: ____/____/____