WILMINGTON
— CITY SCHOOLS —

REQUEST FOR ASSET DISPOSAL (TRANSFER)

Asset Description	Tag or other ID #	To be transferred from:		To be transferred to:	
		Dept.	Location	Date	Location

Reason for disposal (transfer): _____

Method of disposal _____

Signature of building Principal _____

Date of request _____ Approved _____ Disapproved _____

Signature of fixed asset manager _____

Date of disposal (transfer) _____ If sold for scrap, amount received _____

If traded in, tag or identification number of asset acquired _____

Wilmington City Schools
341 S Nelson Ave
Wilmington, OH 45177

04/2021js