

TRANS / ARTICLE 5

LEVY COUNTY  
 REPORT OF TRANSFER OF PROPERTY

To be used in all cases of transfer between Accountable Officers

The following items of tangible personal property have been transferred as indicated:

TRANSFERRING OFFICE		RECEIVING OFFICE	
Department Name		Department Name	
Department Code		Department Code	
Contact Name		Contact Name	

ASSET NUMBER	DESCRIPTION	DATE OF TRANSFER

**\*\*Remember, sensitive information on computers from COURT should be considered before transferring\*\***  
 Please contact the IT Personnel for time and place of procedure for cannibalization of computers.

<p><i>The transferring department has securely removed <u>ALL</u> sensitive data from all electronic devices and media:</i></p> <p>_____ <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>Signature of IT Personnel</i></p>	
---	--

TRANSFERRING OFFICE:

RECEIVING OFFICE:

\_\_\_\_\_  
 Signature of Accountable Officer

\_\_\_\_\_  
 Signature of Accountable Office

\_\_\_\_\_  
 Typed Name and Title

\_\_\_\_\_  
 Typed Name and Title

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Date

Transferring Office: Make copy of signed original to keep and send original to Inventory Dept.

NOTE: This TRANSFER FORM needs to accompany the equipment being transferred.