

NESHOBA COUNTY SCHOOL DISTRICT

FIXED ASSET FORM

LOCATION CHANGE

ASSET #	SERIAL #
DESCRIPTION OF EQUIPMENT:	
CHANGE FROM:	CHANGE TO:
LOCATION/TEACHER	LOCATION/TEACHER
ROOM #	ROOM #
GRADE/SUBJECT(S) TAUGHT:	GRADE/SUBJECT(S) TAUGHT:
.....
OFFICE USE ONLY:	
DATE CHANGED:	CODE OF RESPONSIBLE ORGANIZATION:
EXPENSE ACCOUNT NUMBER:	

CHANGE OF LOCATION MUST BE REPORTED TO FIXED ASSET PROPERTY CONTACT, WHO WILL SEND TO THE FIXED ASSETS MANAGER LOCATED AT THE CENTRAL OFFICE. IF PURCHASED WITH FEDERAL FUNDS, MUST BE APPROVED BY THE PROGRAM DIRECTOR PRIOR TO CENTRAL OFFICE.

Principal

Date

Federal Programs OR Special Education Director

Date

TRANSFERRED FROM SIGNATURE:

Date

TRANSFERRED TO SIGNATURE:

Date

.....

Central Office Use Only: Date Changed in Fixed Assets System: _____

Signature: _____

