

Date Submitted:

Oklahoma Dept of Career and Technology Education

**FIXED ASSET ADJUSTMENT REQUEST FORM**

FAR Sequence No. (AAAA-YYYYMMDD-NN)

PLEASE CHECK THE APPROPRIATE BOX TO INDICATE TYPE OF CHANGE REQUESTED

**A  Transfer of Usable Equipment:**

Transferring equipment to a school / division / government agency

**B  Dispose of Equipment:** Do not discard equipment until request is approved.

Type of Disposal:

Surplus

Broken/Obsolete

Lost (\*)

Stolen (\*)

Trade In (\*\*)

Returned to Vendor (\*\*)

\*If lost or stolen attach police report &/or detailed explanation of when item last verified

\*\*For new/replacement item attach invoice with description, serial # and cost

ITEM No.	TRANSFER DATE	FROM School	FROM EMPLOYEE	FROM EID	TO SCHOOL	TO EMPLOYEE	TO EID	TO Prog Code	STATE ID NUMBER	SERIAL NUMBER	EQUIPMENT DESCRIPTION
1											
2											
3											
4											
5											
6											
7											
8											

Authorized By: (Originating) Tech Center-SKLCN-School-Agency Division (Date)

Authorized By: (Receiving) Tech Center-SKLCN-School-Agency Division (Date)

Approved By: REGIONAL COORDINATOR for Originating Tech Center (Date)

Approved By: REGIONAL COORDINATOR for Receiving Tech Center (Date)

Approved By: SENIOR STAFF – ONLY for disposal of asset (Date)

Approved & Adjusted By: (ASSET COORDINATOR for ODCTE) (Date)

Transported by: \_\_\_\_\_

Remarks: \_\_\_\_\_