

**MARICOPA COUNTY COMMUNITY COLLEGE DISTRICT
Transfer/Disposal Form**

REPORT OF EQUIPMENT TRANSFER AND/OR DISPOSAL FORM
(INCLUDING EXTERNAL DONATION TO A PUBLIC SCHOOL OR SCHOOL DISTRICT)

To: **Capital Asset Accounting, District Office**

From Campus: _____ **Department:** _____ **Date:** _____

Name of Equipment	New Tag Number	Old Tag Number	Serial Number	-----From-----			-----To-----		
				Campus	Bldg. #	Room #	Campus	Bldg. #	Room #