

The School Board of Broward County, Florida
Capital Assets Activity form
Surplus Declaration Transfer

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☐ *SURPLUS (Principal / Director authorization signature required)

☐ TRANSFER (both issuing and receiving Principal / Director authorization signatures required)

Submit Surplus / Transfer Form to B-stock

Removal Assistance Required

☐

YES

☐

NO

Issuing Location #: _____

Location Name: _____

Contact Name: _____

Phone #: _____

Receiving Location #: _____

Location Name: _____

Contact Name: _____

Phone #: _____

BPI Number <i>Refer to Asset Record download as needed</i>	Serial Number	Model Number	Equipment Description	Obsolete	Broken

Equipment Transfer /
Surplus Approved by: _____ Date: ___ / ___ / ___ Released by: _____ Date: ___ / ___ / ___
Principal / Director (per Policy 3204) Please Print Name, Title

Receipt of Transfer
Acknowledged by: _____ Date: ___ / ___ / ___
Principal / Director (per Policy 3204)

Item(s) Delivered by: _____ Date: ___ / ___ / ___
Please Print Name, Title