

By _____

Date _____

College _____

Division/Department _____

COAST COMMUNITY COLLEGE DISTRICT

SURPLUS FORM

EQUIPMENT TO BE DECLARED SURPLUS

Item	Asset No. (Tag No.)	Identification		Present Location	*Special Funding	Condition of Equipment F= Fair P= Poor I= Irreparable
		Model No.	Serial No.			

Please identify equipment purchased with special funds- VA TEA, JTP A, etc.
Please make arrangements to move the above equipment to your campus storage location.

SUPERVISOR/MANAGER APPROVAL _____

BUSINESS DEPARTMENT APPROVAL _____

Distribution: Purchasing - Business - Originator

