



MILLER CITY - NEW CLEVELAND

LOCAL SCHOOL DISTRICT

P.O. Box 38 • Miller City, Ohio 45864

Asset Transfer Form

Person Requesting Transfer: _____

Asset being transferred from: _____

Asset being transferred to: _____

Asset Tag Number:

Asset Description:

Approved:

Disapproved:

Superintendent Signature:

Date: _____

Please make sure that treasurer receives a copy of this form.