

**Peru Central School
Inventory Change Report**



Building _____ **Person Preparing this Report** _____ **Date** _____

Item Description	Serial #	Bar Code #	Location Change From/To	Disposal* Scrapped Date

- Please give complete details of Disposal:

Signature of Building Administrator: _____

Signature of School Business Administrator: _____

PLEASE RETURN THIS COMPLETED FORM TO THE TREASURER AS SOON AS TRANSACTION IS COMPLETED.