



Los Angeles Unified School District Headquarters  
Office of the Building  
**PROPERTY REMOVAL FORM**

**Name of Person**  
**Removing Property:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Company Name**  
**Removing Property:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
(LAUSD or outside Vendor)

**Department:** \_\_\_\_\_ **Floor:** \_\_\_\_\_

**Removal Authorized By:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
(Department head or (Print name)  
authorized personnel)

X \_\_\_\_\_ **Title:** \_\_\_\_\_  
(Sign name)

**Reason for Removal:** \_\_\_\_\_

**Floor(s) Items Removed From:** \_\_\_\_\_

#	Item Description:	Serial #:
1		
2		
3		
4		
5		
6		
7		
8		

Submit completed form to Security in 1st Floor lobby. Authorized signature must be on file with the Office of the Building on the 2nd Floor.

To Be Completed By Security:

<b>Name of Person</b> <b>Removing:</b> _____	<b>Security Officer</b> <b>Name:</b> _____
<b>Company Name:</b> _____	<b>Time &amp; Date:</b> _____