Agency #

Certificate of Data Sanitization

PM use only Transfer #	Asset #	Asset Desc.	Serial Number	Media Type	Sanitization Status Code	Printed Name / Signature	**Personnel UID** (last 4 SSN required if UID is not available)	Date

I attest all above electronic equipment has been sanitized in accordance with LPAA POL 20140 and a sanitization label has been affixed to each

IT Supervisor (Print): _____ IT Supervisor (Signature): _____ Date: _____

Property Manager (Print): _____ Property Manager (Signature): _____ Date: _____