

**DLA Disposition Services Law Enforcement Support Office
Transfer Request**

Date of the Request: _____

Releasing Agency:	ID:	Receiving Agency:	ID:
Address:		Address:	
City, State, Zip:		City, State, Zip:	
Phone:		Phone:	
Releasing Agency Signature:		Receiving Agency Signature:	
		<i>The below is N/A if the transfer is within the same State or Federal Agency</i>	
State Coordinator/Federal Approval:	YES NO	State Coordinator/Federal Approval:	YES NO
Printed Name:		Printed Name:	
Signature:		Signature:	

The State Coordinator or Federal Chief Executive Official must approve the transfer request. The property may not physically move until the LEA receives approval from the LESO. This form must be signed by the Releasing LEA and State Coordinator or Federal Chief Executive Official as well as the Receiving LEA and State Coordinator or Federal Chief Executive Official (only if the property is being transferred to another State or Federal Agency).

Additional Comments:

	Item Name	NSN/Serial #	File #	DTID	Requisition Number	DEMIL CODE	QTY TO TRANSFER
FOR LARGE QUANTITY INVENTORIES, A SPREADSHEET MAY BE CREATED AND SUBMITTED WITH THIS TEMPLATE							
1							
2							
3							
4							
5							

LESO USE ONLY:

Adjustment Approved: YES NO **Completed in LEEDS:** YES NO

LESO OFFICIAL: _____ **DATE:** _____

Reason if Disapproved: _____