LOUISIANA STATE UNIVERSITY

CAMPUS CORRESPONDENCE

To: Property Management Date: ____________________

Subject: Removal of Security -- Sensitive Data (to be attached to Equipment Inventory Action Request

I,________________________, certify that I have used the indicated method for the removal of Sensitive Data.
(sign your name here)

LSU Inventory #	Mfr's Serial No.	Make/Model No.	Location	Method

Please refer to LSU Policy PS-06.20 - Security of Data and State of LA Policy IO-POL-003 - Data Sanitation for more informatior
(If Additional space is required, please attach a separate page.)

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Departmental IT Personnel Certification

Signature Date

Print Name

Title (IT Personnel)

Phone No. FAX No. E-Mail

FINANCE & ADMINISTRATIVE SERVICES
Office of Property Management
220 Copy & Mail Center <> Baton Rouge, LA <> 70803 <> P 225-578-6922 <> F 225-578-0535
http://www.fas.lsu.edu/purchasing/propmgmt.htm
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