

Transfer Date:

/ /

ITAD TRANSFER RECEIPT

I.T. Assets, Electronics



iSecure Inc.

114 Assembly Circle
Grants Pass OR 97526
(541) 479-1425
(541) 479-2989 fax
www.i-secure.co

ON SITE Services Performed:

- ☐ Serial Number SCANS
- ☐ Picture of Material Transferred
- ☐ Removal, Hard Drive(s)
- ☐ Removal, Equipment
- ☐ Other: _____

CUSTOMER:

Customer Contact:

ID #:

Customer Contact Phone / Email:

ITEMS TRANSFERRED / PROCESSING DETAILS

Servers:	Qty.=	Notes:	Hard Drives Removed:
Routers:	Qty.=	Notes:	
HDD:	Qty.=	Notes:	S/N Scan Complete:
SSD:	Qty.=	Notes:	S/N Scan Complete:
Desktops / Laptops:	Qty.= /	Notes:	Hard Drives Removed:
Monitors:	Qty.=	Notes:	
Phones / Tablets:	Qty.= /	Notes:	Sanitize: Shred:
APCs:	Qty.=	Notes:	
Network Equipment:	Qty.=	Notes:	
Other Equipment:	Qty.=	Notes:	

The items listed above have been transferred to iSecure Inc. and shall be processed in accordance with the services authorized by the customer and in compliance with information security standards identified by NAID Certification, NIST 800-88 standards, and other applicable data security practices.

Signature, Customer

TIME: _____

DATE: _____

Signature, iSecure

TIME: _____

DATE: _____