

LEA/District Chain-of-Custody Form for District

Overage of Materials

Deliver To: SA0990000
 SAMPLE SCHOOL DISTRICT
 99 SAMPEL STREET
 SAMPLE BLDG.
 SAMPLE CITY, USA 99999
 SAMPLE PERSON
 Phone: (999) 9999999
 Fax: (111) 1111111

Ship To: SA0990000
 SAMPLE SCHOOL DISTRICT
 99 SAMPLE STREET
 SAMPLE BLDG.
 SAMPLE CITY, USA 99999
 SAMPLE PERSON
 Phone: (999) 9999999
 Fax: (111) 1111111

The following list contains the security numbers of all secure test materials that are in your LEA/district overage shipment. We have provided this form to help you record where you have assigned test materials from your LEA/district shipment and to account for secure materials not returned.

All secure documents must be tracked using this form or an equivalent form. For further information, see Section 3.3.2 of the TCM.

Overage For TB, GR 4, ELA, 2019, PACK OF 5

Security Number(s)	LEA/District Test Coordinator Signature	Date and Time	School Test Coordinator Signature	Date and Time

551466021

For Internal Use Only:

Pick Batch: 2669240

Delivery: 28504878

Order/Line: 4542479/1

Sequence: 00001

LEA/District Chain-of-Custody Form for District

Overage of Materials

Deliver To: SA0990000
SAMPLE SCHOOL DISTRICT

Ship To: SA0990000
SAMPLE SCHOOL DISTRICT

Overage For TB, GR 4, ELA, 2019, PACK OF 5

Security Number(s)	LEA/District Test Coordinator Signature	Date and Time	School Test Coordinator Signature	Date and Time

End of Security Range

By signing this, you are affirming that you have personally, or through a designee, accounted for all secure overage materials assigned to your location.

LTC Signature: _____ Date: _____