

Commonwealth of Pennsylvania *Chain of Custody Tracking Form*

STD-551/Disposition#: _____

This list should include each piece of IT equipment presented for surplus. Add lines as necessary or attach a separate listing to this form.

ID	Serial Number	Equipment Make/Model and Brief Description	Equipment Sanitized (Y/N)	Storage Devices Sanitized (Y/N)
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
Total Equipment Sanitized:				
Total Storage Devices Sanitized:				

Attestation of Sanitization of Electronic Devices and any/all Electronic Media

I hereby attest that all _____ pieces of electronic devices have been properly sanitized by physical removal of all electronic storage devices and that all _____ pieces of electronic media have been securely erased using a disk wipe software utility and/or degaussing procedure in compliance with [ITP-SEC015](#) and removed from any electronic devices provided as part of this surplus.

Agency/Dept. Name: _____ Contact Info: _____

Print Name: _____ Title (CIO or designee): _____

Signature: _____ Date: _____

The following Chain of Custody should be executed by any party releasing or receiving this equipment during the surplus process. Add lines as necessary.

Date/Time	Released By (Print & Sign)	Received By (Print & Sign)	Location & Comments	ITP- SEC015*

*Each individual releasing and/or receiving must check this box to indicate they have complied with their responsibilities as outlined in [ITP-SEC015](#).

This chart contains a history of this publication’s revisions.

Version	Date	Purpose of Revision
Original	10/4/18	Base Document
Revision	06/21/22	OPD refresh
Revision	07/26/2023	Annual Review – no updates