Data Destruction Form – Schedule 1: Lot Information

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Client Name** | **Client Address** | **Client Phone #** | **Shared Services Asset Tag** | **U of M Capital Asset ID #** | **Make** | **Model** | **Media Serial Number** | **System Serial Number** |
|  |  |  |  |  |  |  |  |  |

Provide all available information. The media serial number is only required if the media is not securely installed in a system.