LOS ANGELES UNIFIED SCHOOL DISTRICT
CENTRAL ADMINISTRATION BUILDING
KEY PRODUCTION REQUEST

TO: LOCK DEPARTMENT DATE _____

SCHOOL / LOCATION NAME _____ LOC. CODE _____
FLOOR _____
CUBICLE _____

AUTHORIZED SIGNATURE _____ SITE KEY ADMINISTRATOR
PRINT NAME _____
PHONE # _____

BUDGET LINE ITEM

FUND	AREA	ORGN.	PROG.	OBJECT

APPROVAL BY DEPARTMENT HEAD

QUANTITY	KEY NO.	**REASON FOR REQUEST / DESCRIPTION OF KEY OR SERV. REQUIRED**

RECEIVED BY: _____

DATE _____

THE POSSESSION OR DUPLICATION OF ANY LAUSD KEY
WITHOUT AUTHORIZATION IS A MISDEMEANOR [P.C. 4691]