



**INVENTORY TRANSFER**

**DO NOT INCLUDE COMPUTERS OR PRINTERS ON THIS FORM**

The following equipment is being transferred to another department. Please remove from departmental inventory files:

FROM: \_\_\_\_\_

Date: \_\_\_\_\_

TO: \_\_\_\_\_

INVENTORY NUMBER	SERIAL NUMBER	DESCRIPTION	PURCHASE DATE	TOTAL COST	FROM BLDG & RM #	TO BLDG & RM #

I hereby relinquish possession of this equipment.

Transfer Approved

I hereby accept possession of this equipment

Chairman / Dean

Director of Fiscal Affairs

Receiving Chairman / Dean

Posted: