



Notification of Change in Inventory

Please fill out this form & route it to the appropriate Chair for their signature. It will also need to be signed by the Receiving Department.

Notifying Department: _____ Date: _____

Dept # _____ Name: _____ Phone: _____

Description of Article: _____

Inventory Number (if applicable): _____ Location: _____

Department Chair/Head Signature _____

Please check item and complete as required:

_____ 1. Relocated within department: From: _____ To: _____

_____ 2. Transferred to : Dept Name _____ Building _____ Room _____

Receiving Signature: _____ Dept # _____ Date: _____

_____ 3. No longer usable, have authorization to transfer or dispose of properly.

FOR OFFICE USE ONLY:			
Original Cost \$	_____	original property purchase: fund #	_____ dept # _____
salvaged to	_____	sold to	_____ traded to _____ allowance: \$ _____
voucher/po #	_____	authorized by	_____ date _____

*original to Plant Services
keep a copy in the originating department
keep a copy in the relocation department*