

## Property Control Equipment Transactions

Department Name			(	)rgani	zation No:			
DEPT NAME	FROM:				TO:			
BUILDING					PLI	EASE LIST BEL	OW	
FLOOR						"		
ROOMS						"		
LOCATION CODE						"		
EQUIPMENT DESCRIPTION		SERIAL NUMBER			P. C. UMBER			
	TYPE	OF TRANSAC	OIT	I (CHE	ECK ONE)			
CHANGE IN LOCATION: ROOM					ACILITIES ASSISTANCE NEEDED FOR MOVE			
CHANGE IN LOCATION: BLDG & ROOM					EQPT SURPLUS			
CHANGE IN LOCATION: DEPT – BLDG - ROOM				OTHER (EXPLAIN)				
APPROVAL:			COPIES:					
The undersigned acknowled listed hereon is the proper								
Signed: (Dean-Director-Dept Head Transferring Dept)			Send the completed form to Рπাഢ-Լ。 Вபாட Library Tower Date:					
Signed:								

(Dean-Director-Dept Head Receiving Dept)