

Property Control Equipment Transactions

| Department Name Organization No: | | | | | | | |
|---|-------|--------|---|---------------------------------------|---------|---------------|------|
| DEPT NAME | FROM: | | | | TO: | | |
| BUILDING | | | | | PL | EASE LIST BEL | OW |
| FLOOR | | | | | | " | |
| ROOMS | | | | | | " | |
| LOCATION CODE | | | | | | " | |
| EQUIPMENT DESCRIPTION SERIAL | | | | | P. C. | | |
| Eggi WENT BEGON! HON | | NUMBER | | NUMBER | | BUILDING | ROOM |
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| TYPE OF TRANSACTION (CHECK ONE) | | | | | | | |
| CHANGE IN LOCATION: ROOM | | | | FACILITIES ASSISTANCE NEEDED FOR MOVE | | | |
| CHANGE IN LOCATION: BLDG & ROOM | | | | EQPT | SURPLUS | | |
| CHANGE IN LOCATION: DEPT – BLDG - ROOM | | | | OTHER (EXPLAIN) | | | |
| APPROVAL: | | | COPIES: | | | | |
| The undersigned acknowledges that the Equipment | | | | | | | |
| listed hereon is the property of Auburn Montgomery. | | | Condition completed form to DINIATIFIC MILE | | | | |
| Signed: (Dean-Director-Dept Head Transferring Dept) | | | Send the completed form to PÚÙÁÜ[[{ ÂĴFI Library Tower | | | | |
| Q | | | Date: | | | | |
| Signed: (Dean-Director-Dept Head Receiving Dept) | | | | | | | |