**TARLETON STATE UNIVERSITY**  
**PROPERTY TRANSFER FORM**

Releasing Agency Ref #  
(For Agency/Surplus use only)  

Receiving Agency Ref #  
(For Agency/Surplus use only)

**Transfer Type:**  
(Indicate one)  

- **Transfer Between Tarleton Departments or Killeen**  
- **Transfer From Tarleton State University To Another Agency**  
- **Transfer Into Tarleton State University From Another Agency**

Name of person preparing form:  
__________________________________________________________________________  
Name – Phone Number – E-mail

If For Surplus Pick up:  
__________________________________________________________________________  
Contact Name – Phone Number – E-mail and Location

<table>
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<th>Asset Number</th>
<th>Description</th>
<th>Class Code</th>
<th>Acq. Date</th>
<th>Rec Agcy Asset #</th>
<th>New Location</th>
<th>Asset Value</th>
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If additional lines are required, use and attach additional forms as needed.

TOTAL VALUE __________________

Releasing Dept/Agency _____ (Into/Out Of only)  
Campus Code  

Receiving Dept/Agency _____ (Into/Out Of only)  
Campus Code

Dept/Unit  
Releasing Department Name

Dept/Unit  
Receiving Department Name

Signature of Releasing Department Head  
Date ___________________

Signature of Receiving Department Head  
Date ___________________

----------------------------------------------------------------------------------- FOR INTER-AGENCY SURPLUS USE ONLY -----------------------------------------------------------------------------------

Signature of Property Manager  

Signature of Property Manager

Member & Agency Number  

Member & Agency Number

Date  

Date