

Property Transfer Form

Items #1 through #5 must be filled out by the department and submitted to the Inventory and Surplus Property department at Box T-0600.

FORM MUST BE SUBMITTED ON LIGHT BLUE PAPER

Questions concerning the document may be directed to the Inventory and Surplus Property Specialist at extension 9349.

TARLETON STATE UNIVERSITY PROPERTY TRANSFER FORM

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

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

Transfer Type: _____
(Check 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 Name - E-mail and Location

| Asset Number | Description | Class Code | Acq. Date | Rec Agcy Asset # | New Location | | Asset Value |
|----------------------------------|----------------------------------|------------|-----------|------------------|--------------|--------|-------------|
| | | | | | Bldg # | Room # | |
| <input checked="" type="radio"/> | <input checked="" type="radio"/> | | | | | | |
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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) Receiving Dept/Agency _____ (Into/Out Of only)
Campus Code - OR - Campus Code

Dept/Unit Releasing Department Name Dept/Unit Receiving Department Name

Signature of Releasing Department Head Signature of Receiving Department Head
Date _____ Date _____

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

Signature of Property Manager Signature of Property Manager

Member & Agency Number Member & Agency Number

Date _____ Date _____