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 #	

If additional lines are required use and attach additional forms as needed.

TOTAL VALUE _____

Releasing Dept/Agency_____ (Into/Out Of only)
Campus Code

_____ _____
Dept/Unit **Releasing Department Name**

_____
Signature of Releasing Department Head

Date _____

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

_____ _____
Dept/Unit **Receiving Department Name**

_____
Signature of Receiving Department Head

Date _____

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

_____
Signature of Property Manager

_____
Member & Agency Number

_____
Date

_____
Signature of Property Manager

_____
Member & Agency Number

_____
Date