



Property Management - Inventory Interdepartmental Property Transfer Form

**JSU Box 18690
Jackson, MS 39204
Phone: 601-979-4181**

This form is to be submitted when equipment is transferred from one University department to another. Please include all information.

Dept. Contact _____ Phone # _____ Date _____

E-NUMBER	ITEM DESCRIPTION	SERIAL NUMBER	NEW ROOM/FLOOR	NEW BLDG.

The following signature and information will authorize the transfer of this equipment FROM the department transferring the equipment TO the department receiving the equipment.
Submit to Property Management - Inventory after BOTH Department Heads have signed.

Department Transferring Equipment:	Department Receiving Equipment
Location Code _____	Location Code _____
Dept Name _____	Dept Name _____
Printed Name _____	Printed Name _____
Dept Head Signature _____	Dept Head Signature _____
Date _____	Date _____

Property Management Inventory Use Only
Updated By: Printed Name _____
Signature _____
Date _____

Copy for departmental files