

Office Use Only

***Inventory Tag #	***Description	***Serial #	Location Building & Room #	Logistical Date to IT Dept	IT Department				Logistical Date to Surplus	Property Mgmt. Value
					HardDrive Serial #	Bar Code #	Initials	Date		

Property Custodian's Signature: _____ Date: _____

OFFICE USE ONLY BELOW THIS LINE

Equipment Pickup Completed by: Initials: _____ Date: _____ Departmental Representative Initials _____ Date _____
 _____ & Initials: _____ Date: _____ > Z/s _____ DEPT D E Initials _____ Date _____