MSU-BOTTINEAU CAMPUS
REQUEST TO TRANSFER OR DELETE EQUIPMENT

Please complete this form before transferring or moving equipment from one location to another. This form should be given to the Property Control Officer located in the Business Office.

A. DESCRIPTION OF EQUIPMENT

Inventory No.	Description	Explanation

B. TYPE OF ACTION — C. TRANSFER INFORMATION

☐ **Deletion**	From	To
☐ **Transfer** (Complete Section C)	Program :	Program:
	Bldg. :	Bldg. :
	Room # :	Room # :

D. APPROVALS

1. Transfers Only

_____ _____ _____ _____

Date **Division Director (Transfer From)** **Date** **Division Director (Transfer To)**

2. Deletions

_____ _____

Date **Division Director**

3. Administrative

_____ _____

Date **Property Control Officer**