

In accordance with Administrative Procedure 501, this form must be completed each time a state-owned item is transferred between departments causing a need to update inventory information. It is the responsibility of the department Property Control Designee to obtain the required signatures and forward this document to the Office of Property Management.

State Tag Number (Bar Code label)	Serial Number	Description	Date
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Type of Movement

- Permanent
 Temporary/ On Loan

Scheduled Return Date: _____

From:

Department Name		Department ID #	Name of Property Control Designee (Print)	
Building	Room No.	Date Moved	Signature of Property Designee	Ext.

Department Head Approval (print name)	Date	Department Head Approval (signature)
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Acknowledges release of item bearing State Tag and Serial Identification specified above.

To:

Department Name		Department ID #	Name of Property Control Designee (Print)	
Building	Room No.	Date Moved	Signature of Property Designee	Ext.

Department Head Approval (print name)	Date	Department Head Approval (signature)
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Acknowledges receipt of item bearing State Tag and Serial Identification specified above.

Refer to Administrative Procedure, Property Control - AP 507

Property Office Use:

Name of Person Making changes on Database	Date Entered
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Remarks