

# TRINITY UNIVERSITY EQUIPMENT TRANSACTIONS

<p>_____ Director or Chair Signature                      Date</p> <p>_____ Vice President Signature                      Date</p>	<p>To: <b>Business Office, Inventory Control</b></p> <p>From: _____</p> <p>_____</p> <p>Date: _____      File: _____</p>
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## TYPE OF TRANSACTION (CHECK ALL APPROPRIATE BOXES)

<p><b><u>TRANSFERS</u></b></p> <p><u>Change in Location Only:</u> Transfer Accountability to: Department _____</p> <p>Remove to Storage: EXCESS EQPT: OBSOLETE: Other (explain): _____ _____</p>	<p style="text-align: right;"><b><u>DISPOSALS</u></b></p> <p><u>Asset Missing/Stolen:</u> <b>(must be reported to Campus Security)</b> Case No: _____</p> <p><u>Asset Traded:</u> DPO#: _____ Amount: _____</p> <p><u>Asset Sold:</u> Date: _____ Amount: \$ _____</p> <p>Sold to: _____ _____</p>
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Asset #	Equipment Description (detailed)	Serial #	QTY	COND	From Bldg/Room	To Bldg/Room

**CONDITION:      G-GOOD                  F-FAIR                  P – POOR                  W – WORN OUT**

Transaction already completed – for recording purposes only

Forward to Physical Plant to initiate transaction. Contact: \_\_\_\_\_ Phone#: \_\_\_\_\_

Remarks: \_\_\_\_\_

<p>Delivered by: _____</p> <p>Received by: _____</p> <p>Date: _____</p>	<p><b><u>Distribution:</u></b></p> <p>Send or fax one copy to the Inventory Coordinator, fax # 8090. Inventory Coordinator will distribute copies to the required department.</p>
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