INVENTORY CHANGE NOTIFICATION

The following information must be provided to the Auditor's Office each time an inventory item is removed from your office or department. All items that have been inventoried for you office or department must be available for a physical inventory.

OFFICE REQUESTING CHA	ANGE:	
ITEM BEING CHANGED:		
TYPE OF ITEM:		
DESCRIPTION: (Size, Color, Etc.)		
Additional Informatio	n:	
Bran	d Name:	
	Model:	
Serial 1	Number:	
INVENTORY	TAG #:	
TYPE OF CHANGE	(Put an "X" in box)	
TRANSFERRED TO ANOTHER OFFICE	PLACED IN STORAGE STILL WORKS (SURPLUS)	PLACED IN STORAGE DOESN'T WORK (SALVAGE)
Transferred To:		
Date Transferred:	(Name of Office Transferred	3 ,
Signed Ry:		