

**FAIRMONT STATE  
UNIVERSITY**

**PIERPONT COMMUNITY  
AND TECHNICAL COLLEGE**

**CAPITAL EQUIPMENT TRANSFERS REPORTING FORM**

ASSET DESCRIPTION/MODEL #	ASSET TAG #	SERIAL #
ASSET DESCRIPTION/MODEL #	ASSET TAG #	SERIAL #
ASSET DESCRIPTION/MODEL #	ASSET TAG #	SERIAL #

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**COMPLETE THIS SECTION FOR TRANSFERS ON CAMPUS**  
*PROPERTY MOVING TO A NEW PERMANENT LOCATION WITHIN FSU and PIERPONT Campus*

**TRANSFERRED FROM:**

BLDG. #: \_\_\_\_\_  
ROOM #: \_\_\_\_\_

\_\_\_\_\_  
Signature of Authorized Person

**TRANSFERRED TO:**

BLDG. #: \_\_\_\_\_  
ROOM #: \_\_\_\_\_

\_\_\_\_\_  
Signature of Person Receiving Property

Transfer Date: \_\_\_\_\_

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**COMPLETE THIS SECTION FOR TRANSFER TO ANOTHER AGENCY**  
*PROPERTY TRANSFERRED TO Municipal, County, State or Federal Agency*

\_\_\_\_\_  
Printed Name of Person Receiving Property

\_\_\_\_\_  
Organization/Agency Name

\_\_\_\_\_  
Signature of Person Receiving Property

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Phone #

\_\_\_\_\_  
City, State, Zip Code

Present Value of Equipment: \_\_\_\_\_

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The signature below certifies that the above transfer of equipment is approved by the Administration of Fairmont State or Pierpont.

\_\_\_\_\_  
Signature of Dean/Chair/VP or Director of School or Department

\_\_\_\_\_  
Date:

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**ACCOUNTING OFFICE USE ONLY**

Posted By: \_\_\_\_\_

Date: \_\_\_\_\_