

**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 #

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: _____

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: _____

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:

ACCOUNTING OFFICE USE ONLY

Posted By: _____

Date: _____