# TEXAS STATE UNIVERSITY EQUIPMENT TRANSFER FORM

Print Form

### Inv. No.

**Serial No.**

**Description Inv. Value**

### From: (Present Inventory Location)

Department **Fax No**.\_\_\_\_\_\_\_\_\_ **Fax number where a copy of**

**the equipment transfer form can**

Resp. Cost Cntr. Print Name

## be sent for Your Departmental records.

Signature

Date

### To: (Present Inventory Location)

Department **Fax No.\_\_\_\_\_\_\_\_**

Resp. Cost Cntr.

Print Name Signature Date

### PROPERTY MANAGEMENT

Signature Date

## Room Number \_\_\_\_\_\_\_\_

**Fax number where a copy of the equipment transfer form to be sent for Your Departmental records.**

**A member of the Texas State University System**