

**TRANSFER OF EQUIPMENT FORM**

**Ateneo de Zamboanga University**

**PURCHASING AND CUSTODIAL OFFICE**

*This form is to be used for transfer of equipment(s) between two departments.*

**DATE:**

**FROM CONTROL NO.:** **TO CONTROL NO.:**

**FROM DEPARTMENT:** **TO DEPARTMENT:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **OLD CONTROL NO.** | **NEW LOCATION** | **DESCRIPTION** | **SERIAL NO.** | **VALUE** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**FROM BLDG.: TO DEPARTMENT:**

**JUSTIFICATION (REQUIRED):**

**MUST BE COMPLETED AND SIGNED BY BOTH PARTIES**

|  |  |
| --- | --- |
| FROM: Authorized Official in Dept. **TRANSFERRING** Equipment.  Name:  Signature:  Phone:  Date: | FROM: Authorized Official in Dept. **RECEIVING** Equipment.  Name:  Signature:  Phone:  Date: |

|  |
| --- |
| **INVENTORY STAFF**  **NAME: DATE PROCESSED:** |

***PLEASE FILE IN TRIPLICATE: Transferring Office / Receiving Office / File Copy***