

**COLLEGE OF VETERINARY MEDICINE**

**Property Transfer**

Please transfer the following equipment from of \_\_\_\_\_  
inventory, to the inventory of \_\_\_\_\_.

Equipment Description	Serial Number	Inventory No.
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

\_\_\_\_\_  
Transferring Department Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Receiving Department Signature

\_\_\_\_\_  
Date

New location for equipment: \_\_\_\_\_