Evergreen, Alabama

INACTIVE EQUIPMENT
TRANSFER TO WAREHOUSE

Department _____ Date _____

Inventory Number	Description	Serial Number	Purchased	Amount	Accounting Department New Inventory Number

I certify the above equipment is not serviceable for instructional use and request that items listed be disposed of. I have released the equipment to _____ for storage until it is disposed of.

Date _____ Faculty/Staff_____

Received by _____ Date _____

Approved: _____ Approved: _____
President Fiscal Accountant

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Accounting Department

Processed: Date _____ Initials _____