



FIXED ASSET TRANSFER REQUEST

RECEIVING CUSTODIAN NAME AND RECEIVING CUSTODIAN NUMBER			DEPARTMENT CODE		DATE (MM/DD/YYYY)			
Choose From Drop Down Box								
TRANSFER PREPARED BY		DATE PREPARED		ADDRESS/EXTENSION				
				1801 E 4th St., Okmulgee, OK 74447				
ASSET NUMBERS			A5 - INTERDEPARTMENTAL TRANSFER					
ASSET NUMBERS	QTY	AC	SERIAL NO, ITEM DESCRIPTION, MFG/MODEL	COST EACH	BLDG	ROOM	OWNER CODE	
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				TOTAL VALUE OF ADDITIONS	\$ 0.00			
COMMENT:								
<p>RECEIVING DEPARTMENT CERTIFICATION</p> <p>"I assume inventory accountability for the above described equipment."</p> <p>SIGNED _____ DATE _____</p> <p style="text-align: center; font-size: small;">DEPARTMENT HEAD</p>								
<p>RELEASING DEPARTMENT CERTIFICATION</p> <p>"I relinquish inventory accountability for the above described equipment."</p> <p>SIGNED _____ DATE _____</p> <p style="text-align: center; font-size: small;">DEPARTMENT HEAD</p>								
Releasing Custodian			SIGNED: _____		DATE			
RELEASING CUSTODIAN NUMBER			DEPARTMENT HEAD		DATE			