

## Request to Transfer/Donate Items to State-Funded Entity

Receiving & Property Control  
 Phone: 662-325-2545  
 Fax: 662-325-4551  
 Mail Stop 9605

*This form prepared by:*

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Date: \_\_\_\_\_

Agency \_\_\_\_\_ Dept Code \_\_\_\_\_ Department Name \_\_\_\_\_ Department Head \_\_\_\_\_

Inventory Number	Acquisition Code	Description	Serial Number	Quantity	Value

**EXPLANATION BELOW IS ESSENTIAL TO CONSIDERATION OF THIS REQUEST**

Justification for Donation: \_\_\_\_\_

Recipient of Items: \_\_\_\_\_ State of Mississippi Funded Entity(other than MSU)  
 \_\_\_\_\_ State Agency/Institution Outside of Mississippi

Recipient Name: \_\_\_\_\_ Signature of Recipient: \_\_\_\_\_  
 Title: \_\_\_\_\_ Division/Department: \_\_\_\_\_

Institution/Entity: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_

TITLE	APPROVAL SIGNATURES	DATE
Department Property Representative:	_____	_____
Department Head:	_____	_____
Dean:	_____	_____
Director:	_____	_____
Vice President:	_____	_____
Property Officer/Asst. Property Officer:	_____	_____

*Property Control Use Only:*

Agency \_\_\_\_\_ Trans Code \_\_\_\_\_ Report No \_\_\_\_\_ Disposal No. \_\_\_\_\_ Initial \_\_\_\_\_ Date \_\_\_\_\_

### General Instructions

Listed below are brief instructions and definitions of terms needed to complete this form

**Use this form for equipment being transferred, at no cost, to an agency within the State of Mississippi.  
This form must be completed prior to the release of equipment to the recipient (including all signatures).**

MSU Inventory Dept Code	One or two digit code assigned to each department in possession of property
MSU Department Name	Name assigned to each department in possession of property
Inventory Number	Inventory number assigned to equipment (please enter NOI if item is not on your departmental property (equipment) inventory)
Acquisition Code	Found under the accounting tab in InCircuit
Description	Brief description of the item
Serial Number	Serial number associated with the item/if applicable
Quantity	Quantity of items being transferred
Value	Value of items being transferred
Justification for Donation	Detailed description of the reason for transfer
Recipient of Equipment	Include all pertinent information
Signature of Approving Officials	Form will not be processed until all signatures are included

Complete and return original to:

**Mississippi State University  
Receiving & Property Control  
PO Box 6177  
Miss State MS 37962  
Mail Stop 9605  
Phone (662) 325-2545**

Maintain a copy in departmental file.