

Interdepartmental Property
Transfer Form

This form should be submitted when equipment is transferred from one Univeristy department to another. Please include all available information. Incomplete or handwritten forms will be returned to the department for completion.

DIVISION OF FINANCE

Receiving & Property Control P.O. Box 6177 Mississippi State, MS 39762 405 E. Garrard Road Starkville, MS 39759 P. 662.325.2545 F. 662-325-4551

www.property.msstate.edu

This form prep	ared by:					
Name:			Phone:	_	Date:	
Agency:	Dept. Code:	Dept:		D	ept Head:	
Inv No.		Description		Serial Numb	er	Cost
	•	Additional items may l	be listed in an atta	achment to this form	•	

The following signatures and information will authorize the transfer of this equipment FROM the department transferring the equipment TO the department receiving the equipment. Submit this form to Receiving & Property Control once BOTH unit heads have signed the form.

Agency: Agency: Dept Code: Dept Code: Dept Name: Dept Name: Unit Head: Unit Head:	
Signature: Signature:	
Property Control Use Only	
Agency: Agency:	
Trans Code: Trans Code:	
Rpt No: Rpt No:	
Mo/Yr: Mo/Yr:	
Initials/Date: Initials/Date:	

General Instructions

This form prepared by Name, phone number of person completing form - for contact purposes.

Phone number of person completing the form.

Date of form completion.

Agency Agency associated with department.

Dept Code Code assigned to department.

Dept Name of department associated with equipment.

Dept Head Unit head of department.

Inv. No. Asset number assigned on department inventory report.

Description Description of item as it appears on department inventory report.

Serial No. Serial number of item matched with department inventory report.

Cost Cost of item as it appears on the department inventory report.

Department Transferring

Equipment

Enter Agency, Dept Code, Department Name, and Unit Head name related to the

department transferring the equipment.

Department Receiving

Equipment

Enter Agency, Dept Code, Department Name, and Unit Head name related to the

department receiving the equipment.

Unit Head Signature Self explanatory.

Complete and forward to: Receiving & Property Control (RPC)

P.O. Box 6177

Mississippi State, MS 39762

Mail Stop 9605

Phone: (662) 325-2545 Fax: (662) 325-4551