



CALIFORNIA STATE UNIVERSITY, DOMINGUEZ HILLS

Asset Management
1000 E. Victoria Street – Warehouse - Carson, CA 90747 - (310) 243-2376 - FAX (310) 516-3351

EQUIPMENT TRANSFER FORM

Department Transferring Equipment

Department/College: _____

Requestor: _____ Date: _____
Director/Dean/Property Coordinator

PLEASE REMOVE THE EQUIPMENT LISTED BELOW FROM THE INVENTORY OF

and assign to the following department(s).

Department/College _____

Table with 5 columns: PROPERTY #, DESCRIPTION, TRANSFER FROM: Bldg/Room, DELIVER TO: Bldg/Room, ASSIGN TO DEPT.

Signature: _____
Dean/Director/Property Coordinator

Department Receiving Equipment

Department/College: _____

Requestor: _____ Date: _____

Our department received the above listed equipment. Please add the equipment to our inventory.

Equipment Received by: _____ Date: _____