

Asset Disposal/Move Form

Contact Name		CU Tag Number	
Phone Number		Attach Bar Code Tag Here	
Department			
Disposal/Move Date			
Asset Serial#/VIN			
Description of Asset			

Select one of the following disposal/move actions and complete all information in the section:

Sold
Sale Price \$ _____
Money Deposited To _____ Fund _____ Org _____ Account
<i>Attach a copy of the deposit slip to this form.</i>

Traded In	
Used to Purchase _____	From Vendor _____
<i>Attach a copy of the invoice showing the trade in value to this form.</i>	

Transferred/Moved to Another CU Department	
From Department _____	To Department _____
New Dept Contact Name _____	Phone # _____

Donated, Discarded, or Other
Donated To Agency Name _____
Discarded, Obsolete or no value _____
Other, Explain _____
<i>Attach a copy of the donation receipt to this form.</i>

Department Approval Signature: _____ **Date:** _____

Send the completed form to the Controller's Office. Visit the Controller's website for additional information about disposals.

For Controller's Office Use			
Acct # _____	New Org _____	Building# _____	Room# _____
Sys # _____	New System # _____		
Notes _____	Updated by _____ Date _____		