

INVENTORY CHANGE FORM



East Guernsey Tag # _____ Your room number _____
(Use room number from map, not name)

Description _____ Mfgr _____

Serial # _____ Model # _____

Central Office: Note fed grant here

- TYPE OF CHANGE:
- New item - has not been tagged yet *
 - Change serial # or description as noted above
 - Item moved to a different location: New Room #
 - EG tag lost - needs replacement tag (Use room number, not name)
 - Item discarded....reason -
 - _____ sold _____ stolen _____ destroyed
 - _____ other (describe) _____

* If a new item include: Purchase Order # _____ MM/YY purchased _____

Vendor Name: _____

Staff member signature Date

Supervisor approval Date

Submit this form immediately to the Central Office when a change in inventory occurs.

Central Office use only

for New Inventory	
Prop: _____	Cost:(nearest dollar)\$ _____
Bldg: _____	Check #: _____
Room: _____	Fund: _____
Class: _____	Func: _____
Acct: _____	

for Retired Inventory	
Page # _____	
Orig Cost \$ _____	

_____ Change entered on American Appraisal Update

New Tag sent on:

Signature Date