

Request to Transfer Property Form

TRANSFERRING SUBRECIPIENT				RECEIVING SUBRECIPIENT				
Name				Name				
Phone				Phone				
Address				Address				
Property Purchased Under Contract #				Property Transferred Under Contract #				
SDWP Asset Tag #	Date Rcv'd	Type <i>(Furniture or Equipment)</i>	Description of Item	Serial #	Unit Cost	% of SDWP Funds Used	Condition*	For SDWP Use Only Date updated in inventory
*Conditions: Good, Fair, Poor/Damaged, or Scrap								
I CERTIFY that the above property is surplus and is being transferred to				I CERTIFY that the above property has been received from				
Signature of Authorized Official Transferring Party		Date		Signature of Authorized Official Receiving Party		Date		
FOR SDWP USE ONLY								
Signature of Department Director						Approval Date		

Attach another page if necessary.