



# PROPERTY SURPLUS TRANSFER DISTRIBUTION TO PURCHASING – SURPLUS PROPERTY

Control No. \_\_\_\_\_

This form serves one purpose: **SURPLUS PROPERTY TRANSFER TO PURCHASING** **NOTE:** Do not combine casualty/loss or transfer to another department on this form.

**I. PROPERTY INVOLVED** (Group/Department to fill out boxes 1–9)

	1	2	3	4	6	7	9		10
	Description/ Serial No. (if available)	Condition	Inventory No.	Purchase Price 5 Purchase Date	Estimated Current Value	Mileage OR 8 Hours	Fully Depreciated?		Purchasing Use Only Assigned Auctioneer
1							Yes		
							No		
2							Yes		
							No		
3							Yes		
							No		
4							Yes		
							No		
5							Yes		
							No		

**II. TO PURCHASING – SURPLUS PROPERTY:**

The above property is surplus to the needs of \_\_\_\_\_  
*Department*

\_\_\_\_\_ at \_\_\_\_\_, as of \_\_\_\_\_ per  
*Cost Center* *Location* *Date*

/s/ \_\_\_\_\_ or \_\_\_\_\_  
*Department Head Name* *Signature* *Date* *Designee Name* *Signature* *Date*

Reason for surplus: \_\_\_\_\_ Not For Public Use/Auction

Department's surplus contact: \_\_\_\_\_ Phone \_\_\_\_\_  
*Print Full Name and Title*

*For Purchasing Use Only*

Received by: \_\_\_\_\_ on \_\_\_\_\_ Disposition of surplus property:  
*Surplus Property* *Date*