

## **UNIVERSITY OF WEST FLORIDA**

## Departmental Property Transfer Log Cost Less than \$5,000 - Departmental Use Only

Transferring Department Name:			<b>Receiving Department Nan</b>	eiving Department Name:		
Orgn#			)rgn#			
Please move and have department or authorized representative acknowledge receipt when move is completed, and keep this document.						
Department Tag#	Serial #	Property Description		From: Bldg # Room#	To: Bldg # Room#	
Transferring Dep this form	artment: I hereby authorize the	above transfer for the property liste	d on <b>Receiving Department:</b> I here this form.	Receiving Department: I hereby acknowledge and accept accountability for the property on this form.		
Signature, A	ccountable Officer/Pro	ject Director Date	Signature, Account	Signature, Accountable Officer/Project Director Date		
					Revised 5/23/2024	