

INVENTORY/EQUIPMENT CHANGE OF STATUS

Southern Illinois University Edwardsville

Department Information (Section 1)

From: _____
Property Control Unit Title --Unit Number

Fiscal Officer/Delegate Signature / Date

To: _____
Property Control Unit Title --Unit Number

Fiscal Officer/Delegate Signature / Date
(or non-SIUE Borrower Signature / Date)

Transaction Information (Section 2): If you have questions, please contact Property Control at email PropControl@siue.edu.

Select One: _____

Equipment Information (Section 3)

Inventory Tag No.	Description (inc. Make & Model #, if applicable)		Prop Control Use Only

PROPERTY CONTROL USE: