

Property Transfer Form

Cal State Fullerton T-1101 800 N. State College Blvd. Fullerton CA 92831

From Department	To Department	Tag Number	New Location	Description

Signatures

Former Owner	Name:	Signature:	Date:
New Owner	Name:	Signature:	Date:
Asset Management	Name:	Signature:	Date:

"From Dept" = Department originally holding asset
 "To Dept" = Department that will be taking over the asset
 "New Location" = Room # of where the asset will be located

Please email electronic copy to: assetmanagement@fullerton.edu