*Note: This form is submitted in connection with a work request for surplus.*

|  |  |
| --- | --- |
| Requestor’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Department \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **INVENTORY / SURPLUS****MANAGEMENT SHEET** |

|  |  |  |  |
| --- | --- | --- | --- |
| **Purpose** | **Item** | **Condition of Items** | **Date** |
| [ ]  Surplus | [ ]  Office Furniture | [ ]  Good | [ ]  Scratched | Pick up date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| [ ]  Storage | [ ]  Misc | [ ]  Fair | [ ]  Broken | Delivery date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Decal or serial # \_\_\_\_\_\_\_\_\_\_ | [ ]  Bad | [ ]  Other |  |

**Description of Items**

|  |
| --- |
| Click here to enter text. |

**Inventory Disposition**

|  |  |
| --- | --- |
| Click here to enter text. | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_****Requestor’s Date****signature****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_****Moves & Setups Date****Signature****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_****Warehouse Supervisor Date****signature** |