

VPCIO INVENTORY DATA CHANGE FORM

TRANSFER OF EQUIPMENT BETWEEN STATE AGENCIES (SUNY).

- A. Fill in all information in the enclosed box.
B. To **TRANSFER equipment**, fill in the data for only those applicable fields.
C. **IF transferring multiple items**, attach a list to this form with the applicable fields information for each item.
D. Return a copy of this form to the NCS Asset Manager at ncs-admin@buffalo.edu

NAME OF PERSON REQUESTING CHANGE _____	TELEPHONE _____
DEPARTMENT _____	LOCATION _____ DATE _____
APPLICABLE ASSET # 0 3 _ _ _ _ _	REPORT DATE _____ PAGE # _____

1. BUILDING FROM _____ TO _____
2. ROOM NUMBER FROM _____ TO _____
3. DEPARTMENT ACCOUNT # FROM _____ TO _____
4. SOURCE OF FUNDING FROM _____ TO _____
5. NAME _____ TO _____
6. CONDITION FROM _____ TO _____
7. STATUS FROM _____ TO _____
8. ORIGINAL COST FROM _____ TO _____
9. COST OF REPLACEMENT FROM _____ TO _____
10. PERCENTAGE OF TIME ASSET IS UTILIZED FROM _____ TO _____
11. MANUFACTURER FROM _____ TO _____
12. MODEL # FROM _____ TO _____
13. SERIAL # FROM _____ TO _____
14. QUANTITY FROM _____ TO _____
15. YEAR ASSET ACQUIRED FROM _____ TO _____
16. ADDITIONAL INFORMATION OR CHANGES YOU WOULD LIKE RECORDED CONCERNING THIS ASSET

