

TRUMAN STATE UNIVERSITY

Declaration of Surplus Property

**Please complete form and return to Inventory Control, 105 McClain Hall. Please type or print.
Property not listed on this form will not be picked up by Physical Plant.**

Department _____ Date _____

Signature of Division/Department Head _____ Best Possible Pickup Time(s) _____

Property Location (Building, Room) _____

Name of Contact Person _____ Contact Telephone Number _____

Item	Tagged	University Inventory Tag No.	Complete Description Required	Serial No.	Inventory Control Use Only
1	Yes				
	No				
2	Yes				
	No				
3	Yes				
	No				
4	Yes				
	No				
5	Yes				
	No				
6	Yes				
	No				
7	Yes				
	No				
8	Yes				
	No				
9	Yes				
	No				
10	Yes				
	No				
11	Yes				
	No				
12	Yes				
	No				



For Inventory Control Use Only Approved Yes No Initials _____ Date _____

For IT Services Use Only Approved Yes No Initials _____ Date _____

Comments: _____

For Physical Plant Use Only

Scheduled Pickup Date _____

Date Pickup Completed _____

Worker's Signature _____

Attach Inventory Tag: Glue or Tape