Ohio Valley Educational Service Center
INVENTORY CHANGE FORM

TAG#_____ LOCATION#_____
ITEM_____
DESCRIPTION_____
SERIAL#_____ MODEL#_____ ID#_____

****

Disposition:

_____ Transfer of equipment

Moved from (Location) _____ to _____

_____ Discarded

Date_____ Reason_____

****

New Equipment:

Purchasing Agent_____
Vendor_____
Cost_____ PO#_____ Date Purchased_____

****

Donated Equipment:

Date_____ Donated By_____

****

_____ _____
(Employee's Signature) Date (Supervisor's Signature) Date