

**Inventory Transfer to Surplus Center  
(FF&E - Surplus/Salvage)**

WOID		Date	
Performed by (Name & Title)		Department/Campus	

**Item Description must include the following information (if applicable): Munis Capital Asset Number, Tag Number, Serial Number and/or VIN, plus a brief description.** Provide as much information as possible for each item listed.

Completed by Department/Campus							For Use by Assets Mgmt.		
Item Description	Quantity	Assigned Location	Funds	Initial Cost	PO#	Reason Code	ASSN	Status Code/Initials	Image #

Administrator Approval Signature:
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- Funds:**
- F - Federal
  - L - Local
  - G - Grant
  - D - Donation
  - O - Other
- Reason Codes:**
- O - Obsolete
  - B - Broken
  - D - Damaged
  - U - Unwanted
  - E - Excess
  - S - Other (specify)

- Inventoried by: \_\_\_\_\_ Date: \_\_\_\_\_
- Status Codes for Assets Custodian:**
- D - Salvage/Scrap
  - T - Trash
  - R - Retain for Reuse (Food Service)
  - P - Retain for Parts (Food Service)
- Status Codes for Assets Mgmt:**
- S - Assets Warehouse
  - E - Electronic Recycle
  - A - Auction
  - O - Other (specify)