

# SUB-BOARD I, INC. ASSET TRANSFER FORM

Description of Asset: \_\_\_\_\_  
\_\_\_\_\_

Serial Number: \_\_\_\_\_

Model Number: \_\_\_\_\_

Asset Tag Number (If available): \_\_\_\_\_

Current Department/Location of Asset: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

New Department/Location of Asset: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of Asset Transfer: \_\_\_\_\_

Current Department Manager/Director Responsible for Asset:

\_\_\_\_\_  
Signature Date

New Department Manager/Director Responsible for Asset:

\_\_\_\_\_  
Signature Date

Executive Director : \_\_\_\_\_  
Signature Date