

## INVENTORY TRANSFER REPORT

Entity Name : \_\_\_\_\_

**Fund Cluster :**

From Accountable Officer/Agency/Fund Cluster : _____ To Accountable Officer/Agency/Fund Cluster : _____	ITR No. : _____ Date : _____
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Transfer Type: (check only one)

- ☐ Donation
 ☐ Relocate  
☐ Reassignment
 ☐ Others (Specify) \_\_\_\_\_

[illegible]

Reason for Transfer:

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Approved by: \_\_\_\_\_

Signature : \_\_\_\_\_

Printed Name : \_\_\_\_\_

Designation : \_\_\_\_\_

Date : \_\_\_\_\_

**Released/Issued by:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Received by: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_