



UNIVERSITY
OF SOUTHERN
CALIFORNIA

Division of Financial and Business Services
Equipment Management
INVENTORY ADJUSTMENT FORM

Date Requested 1/28/08	Person to Contact Aimee Barnard	Telephone Number (213) 740-6232	Department Name IMSC	Mail Code 0234
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PLEASE CHECK THE APPROPRIATE BOX TO INDICATE TYPE OF CHANGE REQUESTED

A ☐ Transfer of Usable Equipment: Transferring equipment to another on-campus department, (not Surplus Sales) please complete this section.

Receiving Department Name & Mailing Address _____

Recipient's Name _____

Phone Number _____

B ☒ Disposal of Equipment: Do not discard any equipment unless this request is approved by Equipment Management.
* If an item was lost or stolen a police or DPS report is required and must accompany this form.
Type of Disposal (Check One) Sold ☐ * Lost ☐ * Stolen ☐ Scrapped ☒
Explanation/Remarks: Four dysfunctional and old machines. Including 2 PIII Micron PC's donated from Microsoft Research, a PIV Dell Optiplex and a non-working HP color printer.

C ☐ Other Adjustments: Sent to Surplus Sales _____ (when)
Donated _____ (to whom)
Traded In _____ (PO or Requisition #)
Returned to Vendor _____ (Refund or New Item)
Explanation/Remarks: _____

D ☐ Temporary loan of equipment to an off campus location, less than 30 days

Receiving Department Name & Mailing Address _____

Recipient's Name _____

Phone Number _____

EQUIPMENT IDENTIFICATION			
Equipment Tag Number/Serial#	Description of Each Item	Current Location (Bldg. & Room No.)	New Location (Bldg. & Room No.)
155189	Non working HP Color Printer	RTH 323	N/A
N/A	Non working PIII Micron PC donated from Microsoft Research	RTH 323	N/A
N/A	Non working PIII Micron PC donated from Microsoft Research	RTH 323	N/A
N/A	Non working PIV Dell Optiplex PC	RTH 323	N/A

NOTE: When transferred equipment that has been acquired originally with federal funds, the recipient agrees, as a condition to accepting this property that no charge will be made to the Federal Government under any existing or future government grant, contract, or subcontract for any depreciation, amortization, or use with respect to such equipment.

James Barker _____

Approved by (Type or Print) _____ Approval Signature (Dean/Director, Chair and SBO) _____

Date 1-29-08