

CONTROL #	

## PC REPLACEMENT PLAN

Phone: 747-7136 Fax: 747-7165

INVENTORY #	TRANSFER FROM UNIT CODE	SURPLUS UNIT CODE	ITEM LOCATION Bldg / Room #	N DESCRIPTION	ITEM CONDITION
		7017000			
Point of Contact: Na	me	Pho	one		
Authorized Signature	es:				
Transferring Department (printed name/signature)		Date	Personnel Transporting Equipment (printed name/signature)	 Date	
Receiving Department (printed name/signature)		 Date	Inventory Department (printed name/signature)	Date	