



EQUIPMENT MANAGEMENT
 Wilshire Center Building, Suite 680, 143348

EIMR NUMBER

EQUIPMENT INVENTORY MODIFICATION REQUEST

PART I TYPE OF ADJUSTMENT

For Equipment Purchased with Extramural Funds: Departments must receive agency approval prior to transferring or loaning equipment off UCLA controlled premises or prior to selling, discarding or dismantling equipment.

FABRICATION # _____ ADDITION TRADED IN - Purchase Order Number _____
 LOST DESTROYED- Date: _____ DISMANTLED- Date: _____
 STOLEN: Police Report No. _____ OBSOLETE _____
 INTERDEPARTMENTAL OR INTERCAMPUS (COUNTER SIGNATURE REQUIRED):

DEPARTMENT NAME	ACCOUNT & FUND NO.	CUSTODIAL CODE NO.	CAMPUS
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FROM: _____

TO: _____

LOAN: Name of Borrower: _____ Address: _____
 Name of Lender: _____ Address: _____
 Period of Loan: From _____ To _____

SOLD: DATE: _____ Sale Price \$ _____
 (Attach copy of check & Departmental Deposit Record)

OTHER: (Explain) _____

REMARKS: _____

PART II EQUIPMENT IDENTIFICATION

PROPERTY NUMBER	DESCRIPTION (INCLUDE SERIAL NUMBER)	LOCATION (BUILDING & ROOM)	ORDER OR REFERENCE	ORIGINAL VALUE	SUGGESTED SELLING PRICE	CONDITION OF PROPERTY

PART III DEPARTMENT INFORMATION

DEPARTMENT NAME _____ EXT. _____
 DEPARTMENT BUILDING AND ROOM NO. _____ PREPARED BY _____
 DEPARTMENT ACCOUNT AND FUND NO. _____ INVENTORY CUSTODY CODE _____
 DEPARTMENT HEAD NAME _____ DEPARTMENT FS CODE: _____

PART IV APPROVALS

<p style="text-align: center;">DEPARTMENT HEAD SIGNATURE</p> <p>1. _____ DATE _____</p> <p>2. _____ DATE _____</p> <p style="text-align: center;">(COUNTER SIGNATURE WHEN REQUIRED)</p>	<p style="text-align: center;">FOR EQUIPMENT MANAGEMENT DEPARTMENT</p> <p>PROP. ADMIN. _____ DATE _____</p>
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