

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

# Arkansas State University

## Missing Equipment Report

(Request to Remove Missing Equipment from the University's Inventory Records)

This procedure sets responsibility for maintaining the official records of capital equipment in the Controller's Office. Each University department or office administrator is charged with responsibility for implementing controls designed to safeguard capital equipment assigned to them or their staff.

Missing equipment will not be removed from the official records of the University without approval by the Vice Chancellor for Finance and Administration or his/her designee.

Item Description	Brand/Model	Serial Number	Tag Number	Cost	Date Acquired

### Employee Requesting Removal of Equipment

Name: \_\_\_\_\_ ID Number: \_\_\_\_\_

Department: \_\_\_\_\_ Building/Room: \_\_\_\_\_

Email Address: \_\_\_\_\_ Work Phone: \_\_\_\_\_

### Required Signatures

#### Chair/Supervisor:

\_\_\_\_\_  
Print Name Title Signature Date

#### Dean/Department Administrator:

\_\_\_\_\_  
Print Name Title Signature Date

#### Vice Chancellor/Senior Administrator:

\_\_\_\_\_  
Print Name Title Signature Date

#### Property Accounting:

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

#### **All departmental signatures must be completed prior to submitting to Property Accounting.**

Attach a police report if applicable. Send the original form to Hunter Lewis in the Administration Building, Property Accounting for approval. Equipment items will remain on departmental equipment inventory until this form has been received. For more information, contact Hunter at extension 8449.