

# Change in Fixed Asset Status

Office of the Comptroller, Capital Accounting

Fixed Assets, 45155 Research Place, Ashburn, VA 20147

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

Fixed Asset Tag Number: \_\_\_\_\_

Equipment Description \_\_\_\_\_

Name of Department/Grant/Contract \_\_\_\_\_

Requestor \_\_\_\_\_

Oracle Alias \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

Grant (if applicable): Project / Task / Award \_\_\_\_\_ **RSC signature required below**

Funding Agency \_\_\_\_\_

## AUTHORIZED SIGNATURE REQUIRED

Department Head (sign): \_\_\_\_\_

(print) \_\_\_\_\_ Date: \_\_\_\_\_

Research Service Coordinator (sign) \_\_\_\_\_ stamp \_\_\_\_\_  
(if applicable)

(print) \_\_\_\_\_ Date: \_\_\_\_\_

Request to: Transfer Assets within The George Washington University

From: Building \_\_\_\_\_ Room \_\_\_\_\_ Oracle Alias \_\_\_\_\_

To: Building \_\_\_\_\_ Room \_\_\_\_\_ Oracle Alias \_\_\_\_\_

Name of Property coordinator after transfer: \_\_\_\_\_

Request to: Sell or Donate Assets

Donated / Sell to: \_\_\_\_\_

Sale Price: \$ \_\_\_\_\_

Fair Market Value \$

Date of Disposal

GCAS Journal Entry \_\_\_\_\_

Recipients of GW electronic equipment must complete a Release and Waiver Form.

### For Computers Only:

I certify that all sensitive data, proprietary software and embedded network passwords have been removed from this system.

Print Name \_\_\_\_\_

Authorized ISS / LSP Signature \_\_\_\_\_ Date \_\_\_\_\_

Request to: Send Assets to Warehouse

Circle one: Scrap Condition Usable Condition

Date Picked Up: \_\_\_\_\_ By (name): \_\_\_\_\_

Received by Warehouse (name): \_\_\_\_\_

Report of: Lost or Stolen Assets

Lost

Stolen Date Campus Police Department notified: \_\_\_\_\_

(Attach copy of police report)

Report of: Disposed Assets

Reason for Disposal: \_\_\_\_\_ Where Disposed: \_\_\_\_\_

Fixed Asset Supervisor (sign) \_\_\_\_\_ Date: \_\_\_\_\_

Property Control Specialist (sign) \_\_\_\_\_ Date: \_\_\_\_\_