

White-Property/Acct.
Blue-Accounting
Green-Personnel
Yellow-Employee
Pink-Fiscal Officer

INITIAL PROPERTY ASSIGNMENT FORM

TO: State Department of Audit/Mississippi Valley State University

FROM: _____
(Employee's Name) Employee ID Number

DATE: _____

This is to verify that I have the equipment listed below and I am using it to complete official department business.

Description of Equipment	Serial Number	Inventory Number	Building Location	Room Number

By verifying that these items are in my possession, I am accepting financial responsibility.

(Employee's Signature)

(Fiscal Officer/Department Head)