

**Request for Transfer of Equipment and Supplies from the University of Kentucky**

**NOTE - Board of Trustees approval must be obtained BEFORE any equipment leaves campus**

Equipment Purchased from Existing <u>Active</u> Grants				
Description of Equipment	Manufacturer	Date of Purchase	UK Property Tag ID	Grant Account #

**Principal Investigator** (signature) \_\_\_\_\_  
**Printed Name** \_\_\_\_\_

**Department Chair or Director**  
 (signature) \_\_\_\_\_  
**Printed Name** \_\_\_\_\_

**Dean or Designee** (signature) \_\_\_\_\_  
**Printed Name** \_\_\_\_\_

Note – Equipment must be made available for transfer within the university.

**Equipment and Supplies Purchased from Closed Grants or Other Cost Object/Center**

Description of Equipment	Manufacturer	Date of Purchase	UK Property Tag ID	Grant Account or Other Cost Object/Center

Principal Investigator (signature) \_\_\_\_\_  
Printed Name \_\_\_\_\_

Department Chair or Director  
(signature) \_\_\_\_\_  
Printed Name \_\_\_\_\_

Dean or Designee (signature) \_\_\_\_\_  
Printed Name \_\_\_\_\_