Office Use Only



## Lamar University • Logistical Support PO Box 10004 • (409) 880-8995 • logisticalsupport@lamar.edu

## **SURPLUS REMOVAL REQUEST**

Email the completed	d form to LogisticalSupport@La	amar.edu. If unable to	scan, send to	PO Box 10004.	
Date Requested:		Department: _			
Requested by:			Phone #:		
If Facilities service	es are needed, please includ a desk be mov	e instructions in the ed, please indicate if			are requesting
Inventory Tag #	Description	Serial #	Condition	Current Building & Room #	Cost Office Use Only
Comments:					
f the items being re custodian must sign	moved are presently on your o	epartment's inventory	v, tag #s must	be included and the	property
Property Custodian's Signature:			Date		
OFFICE USE ONLY BELOW THIS LINE  Completed by			Initials: Date:		
□ SPA □ AFR Init	ials: Date:	☐ L DRIVE ☐			Date: