

# ASSETS MOVEMENT FORM

**1. Issuing Department .....**

I approve for permanent/temporary transfer of the following Assets:

No.	Item	Asset Registration No.	Serial No.	Value

**Reason for Movement**

.....  
.....

**H.O.D.**

**Name** ..... **Signature** .....

**2. Directors Approval :**

I approve/not approve the movement.

**Name**..... **Signature** ..... **Date** .....

**3. Receiving Office**

I acknowledge receipt of the above asset.

**Purpose**

.....  
.....  
.....

**H.O.D.**

**Name** ..... **Signature** ..... **Date** .....

**4. Finance Department**

I confirm that the item has been recorded as transferred and a new asset register No. has been issued and notified to the receiving officer.

**Name** ..... **Signature**..... **Date** .....