



VCU

Controller's Office, Fixed Assets Accounting Request for Offsite Equipment

The following fixed asset equipment is University owned and housed off campus. All equipment issued must be used for University Business and returned upon separation from the University.

Date:

Dept. #:

Fixed Asset Information:

VCU Asset Tag #:

Fixed Custodian #:

Equipment Type: Desktop

Laptop

Other: _____

Model #: _____ Manufacturer: _____

Serial #(s): _____

Offsite Information:

Department Name: _____

Employee: _____ Home Number: (____) _____ - _____

Submitted By: _____

Signature

Address of Offsite Equipment:

Street: _____

City:

State:

Zip Code:

Signature: _____ Date: _____

Immediate Supervisor

Accepted

Rejected | Reason: _____

Send documents to **Both***: ***If not a fixed asset, send only to Custodian.**

Departmental Fixed Asset Custodian

Fixed Assets Accounting: Mail: Box 843035 / Email: fixedassets@vcu.edu

When Returned:

Received By: _____

Name

Date