

ASSET TRANSFER FORM

ATF No	CS/ATF/	Date :	
Asset Code			
Asset Description			
Quantity			
Date of transfer			

Transferor Employee & Department	
Location of Asset (Before Transfer)	

Remarks for Transfer (Handing Over)	
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Employee -Transferor (Handed Over)		HEAD - Transferor Department	
Signature		Signature	
Name & Emp ID		Name	
Mobile No.		Mobile No.	

Transferee Employee & Department	
Location of Asset (After Transfer)	

Remarks for Transfer (Taken Over)	
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Employee -Transferee (Taken Over)		HEAD - Transferee Department	
Signature		Signature	
Name & Emp ID		Name	
Mobile No.		Mobile No.	

Assistant- Accounts Department		Finance Officer	
Signature		Signature	
Name & Emp ID		Name	
Mobile No.		Mobile No.	