CENTRAL TEXAS COLLEGE
PROPERTY TAG REQUEST

Upon receipt of new items directly from the vendor, the following information must be provided. Send copy of completed form to Inventory Management via Facsimile to 254-526-1802.

Date Received: _____

Location (Site or Campus): _____

Department Name: _____

Account Number: _____

PO Number: _____

Vendor Name: _____

Vendor Number: _____

Item Description	Manufacture/Model #	Serial #	Cost	Bldg #	Rm #

CTC Form 22 (Rev. 11/06)