

# **MATERIAL TRANSFER FORM**

(In Case of Transfer of Materials from One Location/Department/Division/Section to Another)

The following item has been transfer from.....  
Department/Division/Section/ location to ..... Department/Division/  
Section/location on date .....

SL No	Item Description	Model	Item Serial No/Asset No:	UoM	Qty	Transfer From	Transfer To

**Reason for transfer:**

**Transfer Proposed By:**  
(Name, Signature & Designation)

**Transfer recommended by:**  
**Department Head**

**Transfer Authorized By:**  
**Dy. CEO / CEO**

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**After Completion of Material Transfer (Asset)**

**Material Received By:**  
(Name, Signature & Designation):

**Transfer Verified by:**  
**Department Head**

**Transfer Acknowledged by:**  
**Finance Division (Assets)**