



TRANSFER OF ENHANCED DELIVERY EQUIPMENT AUTHORIZATION FORM

INSTRUCTIONS:

1. Complete the name and address information for the Instructors transferring the equipment.
2. Check the boxes for the items being transferred. List the tag and serial numbers of the equipment where indicated. If one of the items was not in the kit, please draw a line through it.
3. Fax to the Regional Manager for authorization.
4. Regional Manager will fax to the Fulfillment Centre at 920-749-9582.

TRANSFERRED FROM:

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____

TRANSFERRED TO:

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____

EQUIPMENT TRANSFERRED:

Laptop Computer: Tag # _____ Serial # _____

LCD Projector: Tag # _____ Serial # _____

Case: Tag # _____

Remote

Power Strip

Speakers

Keyspan Mouse

Authorization: _____ Date: _____