

Research   
Extension

**TEXAS A&M AGRILIFE**  
**College Station, Texas**

L.A. No. \_\_\_\_\_  
Reference No. \_\_\_\_\_

To the Director  
Texas A&M AgriLife  
College Station, Texas

Authority is requested:

1. Reclassification
2. Gift
3. To Close Construction Project

Reason:

From: \_\_\_\_\_ ( \_\_\_\_\_ ) \_\_\_\_\_  
(Dept. Name) (Unit Code)

Description (Identical w/inventory)	Class Code	Source	Acq Date (mm/dd/yy)	Asset No.	Amount	Owner	Rest	Purpose	Ord

To: \_\_\_\_\_ ( \_\_\_\_\_ ) \_\_\_\_\_  
(Dept. Name) (Unit Code)

Description (Identical w/inventory)	Class Code	Source	Acq Date (mm/dd/yy)	Asset No.	Amount	Owner	Rest	Purpose	Ord	Bldg.	Room	Group Code

Approval Recommended:

Signature

\_\_\_\_\_  
Officers in Charge

Approved:

\_\_\_\_\_  
Director

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Recipient  
(For gifts only)