

General Services Agency
 Copier Relocate Request
 VENTURA COUNTY CONTRACT #6473
 County-Wide Multifunctional Device Rental Program

To: Copier Program Administrator

From: _____

Date: _____

Re: Copier/Relocate Request

AGENCY: _____ **DEPARTMENT:** _____

CONTACT: _____ **TELEPHONE NO.:** _____

Relocate		Address	Model	Serial No.	Floor	Room#
From:						
To:						

Please charge the moves as follows:

Agency	Fund:	Org:	Object:	Activity	Project

Authorized Department Signature



For GSA-Procurement Official Use Only

THE COUNTY OF VENTURA:

CANON BUSINESS SOLUTIONS, INC.

 Printed Name of Authorized Representative

 Printed Name of Authorized Representative

 Title of Authorized Representative

 Title of Authorized Representative

 Signature of Authorized Representative

 Signature of Authorized Representative

 Date

 Date

