

Indiana University Capital Asset Management Exception to Policy

Exception to Policy Information

Organization Name: _____ Date: _____

Requester's Name (printed): _____ Asset/Tag Number: _____

Policy Exception Requested

Justification

Required Signatures

Requester: _____ Fiscal Officer: _____

Return to:

Jason Lett, Capital Asset Management, Poplars 437, Bloomington

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The section below will be completed by the University Capital Asset Office.

Date: _____ Resolution: _____
