



California State University, Long Beach  
Property Management Office

# Confirmation of Inventory Certification

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Date: \_\_\_\_\_

To: Property Management Office (extension 5-4880, property@csulb.edu)

The Annual Confirmation of Inventory is hereby submitted to the Property Management Office.

\_\_\_\_\_ Section A:

No Corrections are needed. I certify that the inventory listing provided by the Property Management Office is accurate and reflects the current inventory of the following department(s) listed by Dept ID:

\_\_\_\_\_

\_\_\_\_\_ Section B:

Corrections are needed. The inventory listing is not accurate. Please update the inventory per the attached inventory listing mark-up. All of the required documentation is attached. I certify that the inventory listing mark-up is accurate and reflects the current inventory of the following department(s) listed by Dept ID:

\_\_\_\_\_

Appropriate Administrator: \_\_\_\_\_

Extension: \_\_\_\_\_

\_\_\_\_\_  
Signature of Appropriate Administrator

\_\_\_\_\_  
Date

Department Record Keeper: \_\_\_\_\_

Extension: \_\_\_\_\_

\_\_\_\_\_  
Signature of Department Record Keeper (for Dept Use Only)

\_\_\_\_\_  
Date