## **Warehouse Services Manifest**

(This side to be completed by customer)

Department:		Contact Name:	
Email Address:		Phone Number:	
Building/Room Num	ber:		
approved manifest and en up any item(s) without an	ter a work order for Materials Movem WS Approved Manifest. Materials M	@liberty.edu for approval. Warehouse Services will return the tent to pick up all item(s) listed. Materials Movement will not pick overment will ONLY pick up the item(s) listed ON the Approved ail to warehousefacilities@liberty.edu.	
Will Items be Reused	by Department: NO YES	Reuse Date:	
	ing item(s), the <b>Reuse Date</b> is a mand- ths, except in extenuating circumstance	atory field. Warehouse Services can only store furniture or like itemes with prior approval.	ı(s)
		t marked for reuse for a total of three business days. After this use Services and repurposed at the discretion of the manager.	
Quantity: List of Items being moved:			
Special Instructions:			
	For Of	ficial Use Only	07/20
IM Approval:	Date Completed:	· ·	_
VS Approval:	Date Completed:	Storage Location:	

## **Warehouse Services Manifest**

(This side to be completed by Materials Movement Staff Only)

Department:	Contact Name:	
Email Address:	Phone Number:	
Building/Room Number:		
Will Items be Reused by Department: NO	YES Reuse Date:	
Quantity: A	dditional List of Items being moved:	
Special Instructions:		
	For Official Use Only	Rev 07/2025
M.M. STAFF Approval: CUSTOMER Approval:	DATE Completed:	