



KEEPER OF THE WESTERN DOOR

ASSET TRANSFER FORM

Description	Quantity	Requested by: Agency/Dept.

Relinquished by:

Seneca Nation of Indians Department of Emergency Management / COVID -19 Response
 12879 Rte. 438
 Irving, NY 14081
 716-532-8178

Signature:
Print Name:
Date:
Time:

Received by: (List all goods issued)
Signature:
Print Name:
Date:
Time:

Intake: Name _____ initial/date _____