EQUIPMENT INVENTORY – FIXED ACCOUNTING AND CONTROL SYSTEM

SELECT FORM: EQUIPMENT VALUED MORE THAN $500.00

Location: _____ **Info Furnished By:** _____ **Tel. No.** _____ **Recorded By:** _____

Inventory #	Building/ Room #	Item Description (Mfg/Model/Serial No.)	Quant.	Purchase Date	Unit Cost	If State Purchased Agency List #	Agency