

# TOPPENISH SCHOOL DISTRICT NO. 202

## FIXED ASSET INVENTORY RECORD

Please complete and return to Mark Kresge, Central Office after delivery of item

### NEW ADDITION

Tag # \_\_\_\_\_

Description \_\_\_\_\_

Location \_\_\_\_\_ Room # (if not mobile device) \_\_\_\_\_

Manufacturer \_\_\_\_\_ Assigned to (if mobile device) \_\_\_\_\_

Serial # \_\_\_\_\_ Purchase Date (month) \_\_\_\_\_

Fund # \_\_\_\_\_ Program code # \_\_\_\_\_

Date delivered \_\_\_\_\_ Check if purchased other than by VISA ☐

Donated by \_\_\_\_\_

***RECEIVED BY :*** \_\_\_\_\_

***COMMENT:*** \_\_\_\_\_

### TRANSFER

Tag # or Serial # if tag missing \_\_\_\_\_

Description \_\_\_\_\_

FROM Building/Person \_\_\_\_\_ Room # \_\_\_\_\_

TO Building/Person \_\_\_\_\_ Room # \_\_\_\_\_

***Signature of person who approved the transfer*** \_\_\_\_\_

***Signature of person who received transferred equipment*** \_\_\_\_\_

FORM COMPLETED BY \_\_\_\_\_ DATE: \_\_\_\_\_