Stark County ESC Equipment Inventory Form

SCESC ID) #/Rarcod	_

Treasurer's Office

1. Affix the SCESC ID# tag in an easy access area. Make sure that the bar code matches the label # already placed on this form.

EQUIPMENT

- 2. Complete ALL areas highlighted below.
- 3. RETURN TO THE TREASURER'S OFFICE.

Description								
Model								
Vendor								
Staff/Dept								
Location								
Serial #								
Warranty Info								
Received By								
	PURCH	HASING	INF	ORMATI	ON			
PO Date		Inv Date			Ck Da	te		
PO Number		Invoice #			Check	_		
Budget A/C			I P	urchase lonth	Cost			
	TRAN	ISFER II		RMATIO	N			
Tag #		From Location					Rm#	
		To Locatio	n				Rm#	
Signature							Date	
	DISP	OSAL IN	IFO	RMATIO	N		■ Disp	osed
Reason for Disposal								
Estimated Repair Cost								
Method of Disposal								
Replacement Yes/No Requested?				Replacem Estimated				
Replacement Equipment Description								
Signature of Director					Date			
Signature of Superintendent					Date			
Per Stark County ESC Po	olicy DN							
<u> </u>								lls 6/13