

Change in Fixed Assets / Inventory

Please record any changes to furniture or equipment and return to the business office

one (1) item per page

Name _____

Location _____

(Campus & Room Number)

Please Check One:

Correction

Add/New

Moved

Disposed

Inventory Number _____

Description _____

Method of Acquisition _____

(purchase, Donation, other, etc.)

Date Acquired, Moved, or Disposed _____

Cost or Value _____

Vendor _____

Make & Model _____

Serial Number _____

(if applicable)

Reason for Disposal _____

Method of Disposal _____

Original Location (if applicable)

Name of Faculty or Staff Member _____

Location _____

(Campus & Room Number)