Hazlehurst City School District
Excellence is the Expectation
Dr. Nonya C. Thrasher, Superintendent
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OFFICE OF FIXED ASSETS

ADD ASSET REQUEST

LOCATION	**P.O. #**	**ASSET COST**
BUILDING	**P.O. DATE**	**ACQUISITION DATE**
ROOM	**CHECK #**	**DONATED?**
CLASSIFICATION	**CLAIM #**	**LEASED?**
GROUP	**FUND**	
CONDITION		**DESCRIPTION**
COMMENTS		**VENDOR #**
Date Entered Into System		**MANUFACTURER**
Entered By		

ASSET #	**BARCODE**	**SERIAL #**	**MODEL #**

To Be Completed At Time of Physical Transfer of Inventory

I am transferring all responsibility for the above inventory item(s): _____
Asset Manager

I am accepting responsibility for the above inventory item(s):_____
Employee

Date Transfer Completed: _____ Transfer Completed By:_____