

**INVENTORY CONTROL
NEW EQUIPMENT**

ASSET ID	_____	ACTIVITY FUND
DEPR. ACCT.	_____	DISTRICT FUND
DESCRIPTION	_____	FUNCTION
CATEGORY	_____	ACTIVITY
DEPARTMENT	_____	DEPR. ORGANIZATION
LOCATION CODE	_____	
DATE ACQUIRED	_____	
VENDOR	_____	
MANUFACTURER	_____	
MODEL	_____	
SERIAL NUMBER	_____	
CHECK#	_____	
# OF UNITS	_____	
UNIT COST	_____	
INITIAL COST	_____	
FUND SOURCE	_____	
DEPR. FLAG	_____	
ESTIMATED LIFE	_____	
DEPR. LIFE	_____	
DEPR. METHOD	_____	

SIGNED

DATE