

CLINTON-MASSIE LOCAL SCHOOL DISTRICT

EQUIPMENT INVENTORY SYSTEM

Please check the appropriate transaction:

- _____ Asset Acquisition (new purchase) (*Complete A, B & C*)
_____ Asset Donation (*Complete A, C & D*)
_____ Asset Disposal (*Complete A, E & G*)
_____ Asset Transfer (*Complete A, E, F & G*)
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A. Complete the following for all transactions:

Building and room number of asset: _____
C-M Tag Number: _____
Asset Description: _____
Accessories: _____

B. Complete the following for asset acquisition:

C-M Purchase Order Number: _____ Year Purchased: _____

C. Complete the following for asset acquisition/donation:

Asset Serial Number: _____ Model Number: _____
Asset Price / Value: _____

D. Complete the following for asset donation:

Name and address of donor: _____

E. Complete the following for asset disposal/transfer:

Reason for disposal/transfer: _____

F. Complete the following for asset transfer:

Asset being transferred from: _____
Asset being transferred to: _____

G. Signatures for asset disposal or transfer: _____ Approval _____ Denial

Principal/Department Head: _____ Date: _____

Superintendent: _____ Date: _____

***** RETURN PROMPTLY TO CENTRAL OFFICE WHEN COMPLETED *****