

BRIGHT LOCAL SCHOOL DISTRICT
FIXED ASSET INVENTORY ADDITIONS

ITEM CATEGORY _____
LOCATION _____
CONDITION _____ ASSET CLASS _____
ORIG. _____

ITEM _____

PLEASE COMPLETE THE FOLLOWING AND RETURN TO THE TREASURER WHEN TAGGING IS COMPLETED.

ROOM NAME & NUMBER _____ DEPARTMENT _____

SERIAL NUMBER _____ TAG NUMBER _____

TAGGER'S SIGNATURE _____ DATE _____

-OFFICE USE-

LIFE EXPECTANCY _____ PURCHASE PRICE _____

P.O. # _____ CK# _____ FUND _____ FUNCTION _____ SPCC _____

TREASURER'S SIGNATURE _____ DATE ADDED _____

DONATED EQUIPMENT

ALL DONATED FIXED ASSETS NEED TO BE ACCEPTED BY THE BRIGHT LOCAL SCHOOL DISTRICT BOARD OF EDUCATION SO THAT THESE ITEMS CAN BE ADDED TO THE INVENTORY.

NAME OF DONOR _____

ITEM _____

SERIAL NUMBER _____ DEPARTMENT _____

ROOM NUMBER _____ FAIR MARKET VALUE _____

-OFFICE USE-

LIFE EXPECTANCY _____ TAG NUMBER _____

FUND _____ FUNCTION _____ SPCC _____

TREASURER'S SIGNATURE _____ DATE _____

TREASURERS MAINTAIN ORIGINAL