

Fixed Asset Inventory Form

General Information

Building: _____	Room # _____
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Purchasing Information

Date Purchased: _____	PO # _____
Vendor: _____	Invoice # _____
Condition: New Good Fair Poor	Method of Acquisition: Purchased Donated
Unit Cost: _____	Account Number: _____

Product Information

Quantity: _____	Model # _____	Serial # _____
Manufacturer: _____		
Description: _____		

Please attach a copy of the invoice to this form.

Name: _____