DATE: _____

FURNITURE, FIXTURE AND EQUIPMENT INVENTORY AS OF _____ Page ___ of

This form shall be turned in with end-of-year checkout procedures.

EMPLOYEE(S) COMPLETING INVENTORY | | **CLASSROOM/AREA:** | |

DESCRIPTION OF ITEM (Include Make, Model, Titles, etc.)	**VENDOR** (If Known)	**EQUIPMENT SERIAL #** (If tagged)	**QTY**	**Total Cost**	**Date Purchased**	**Condition**
Example: Student desks	ABC Company	123456	25	Not known	Not known	Good