

FIXED ASSET INFORMATION

Please Complete All Applicable Information

Revised 11/6/2019

RECEIVED
1/13/21

Asset Tag #:	Fiscal Year:
Asset Description:	PO#:
Vendor Name:	Asset Cost:
Manufacture:	Invoice #:
Retirement/Disposal Date:	Serial #:
Commodity Code:	Model #:

Asset Type & Function (Chose from below)

NEW FIXED ASSET INFORMATION

Class	Sub Class	Department
10 Land	110 Land	1100 Instruction
	120 Land Improvements	2100 Instructional Student Support Services
	130 Infrastructure	2200 Instructional Staff Support Services
20 Buildings	210 Buildings	2300 District Admin
	220 Building Improvements	2400 School Administrative
	230 Portable Buildings	2500 Business Support Services
	240 Carpet/Tile Replacement	2600 Plant Operations & Maintenance
30 Technology	310 KETS Technology	2700 Student Transportation
	320 Non-KETS Technology	3100 Food Service
	330 Copiers	3200 Enterprise Operations
40 Vehicles	410 School Buses	3300 Community Serv. Operations (FRYSC)
	420 Other Vehicles	
50 General	510 Rolling Stock	
	520 Food Service	
	530 Furniture & Fixtures	
	540 Audio-Visual Equipment	
	550 Other	

Please Complete if Tagging New Asset

School/Building Location:	Room #:
Asset Tagged By:	Tagged Date:

SURPLUS ASSET INFORMATION

Asset Description: <u>HP Laserjet Printer</u>	Location: <u>Unknown</u>
Serial #: <u>CNGXCO1655</u>	Model #: <u>4250N</u>
<p>Please Circle Appropriate Code</p> <p>DM - Damaged</p> <p><u>J - Junked (End of Life)</u></p> <p>M - Missing</p> <p>S - Sold</p> <p>ST - Stolen</p> <p>SS - Surplus</p> <p>TI - Trade - In</p> <p>T - Transferred</p>	<p>Place Asset Tag Below, if no tag, please write in Tag #</p> <p><u>11006</u></p>

Please Complete for Surplus of Asset

Signature: <u>Rebecca Manning</u>	Date: <u>1-13-2021</u>
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CHANGE IN ASSET LOCATION

Complete when moving equipment from location to location or from room to room within same location.			
TAG #	Asset Description:		
Serial #:	Model #	Add'l Information:	
Move From: (Current Location)		Room #:	
Move To: (New Location)		Room #:	
Please Complete for Approval of Asset Location Change.			
Signature: _____		Date: _____	

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NEW FIXED ASSET INFORMATION

Asset Tag #: 10622 Fiscal Year: _____
 Asset Description: White Board PO#: _____
 Vendor Name: _____ Asset Cost: _____
 Manufacture: PaperDirect Invoice #: _____
 Retirement/Disposal Date: Unknown Serial #: _____
 Commodity Code: _____ Model #: PRM-AB7-02

Asset Type & Function (Chose from below)

Class	Sub Class	Department
10 Land	110 Land	1100 Instruction
	120 Land Improvements	2100 Instructional Student Support Services
	130 Infrastructure	2200 Instructional Staff Support Services
20 Buildings	210 Buildings	2300 District Admin
	220 Building Improvements	2400 School Administrative
	230 Portable Buildings	2500 Business Support Services
	240 Carpet/Tile Replacement	2600 Plant Operations & Maintenance
30 Technology	310 KETS Technology	2700 Student Transportation
	320 Non-KETS Technology	3100 Food Service
	330 Copiers	3200 Enterprise Operations
40 Vehicles	410 School Buses	3300 Community Serv. Operations (FRYSC)
	420 Other Vehicles	
50 General	510 Rolling Stock	
	520 Food Service	
	530 Furniture & Fixtures	
	540 Audio-Visual Equipment	
	550 Other	

Please Complete if Tagging New Asset

School/Building Location: _____ Room #: _____
 Asset Tagged By: _____ Tagged Date: _____

SURPLUS ASSET INFORMATION

Asset Description: _____ Location: _____
 Serial #: _____ Model #: _____

Please Circle Appropriate Code
 DM - Damaged
 J - Junked (End of Life)
 M - Missing
 S - Sold
 ST - Stolen
 SS - Surplus
 TI - Trade - In
 T - Transferred

Place Asset Tag Below, if no tag, please write in Tag #

Please Complete for Surplus of Asset

Signature: Jad M Date: 1-14-21

CHANGE IN ASSET LOCATION

Complete when moving equipment from location to location or from room to room within same location.

TAG #	Asset Description:		
Serial #:	Model #	Add'l Information:	
Move From: (Current Location)		Room #:	
Move To: (New Location)		Room #:	

Please Complete for Approval of Asset Location Change.

Signature: _____ Date: _____

FIXED ASSET INFORMATION

Please Complete All Applicable Information

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1/14/21

NEW FIXED ASSET INFORMATION	Asset Tag #:	10921	Fiscal Year:	
	Asset Description:	Poster Maker	PO#:	
	Vendor Name:	PROEM	Asset Cost:	
	Manufacture:	PROEM	Invoice #:	
	Retirement/Disposal Date:	Unknown	Serial #:	
	Commodity Code:		Model #:	
	Asset Type & Function (Chose from below)			
	Class	Sub Class	Department	
	10 Land	110 Land 120 Land Improvements 130 Infrastructure	1100 Instruction 2100 Instructional Student Support Services 2200 Instructional Staff Support Services 2300 District Admin 2400 School Administrative 2500 Business Support Services 2600 Plant Operations & Maintenance 2700 Student Transportation 3100 Food Service 3200 Enterprise Operations 3300 Community Serv. Operations (FRYSC)	
	20 Buildings	210 Buildings 220 Building Improvements 230 Portable Buildings 240 Carpet/Tile Replacement		
30 Technology	310 KETS Technology 320 Non-KETS Technology 330 Copiers			
40 Vehicles	410 School Buses 420 Other Vehicles			
50 General	510 Rolling Stock 520 Food Service 530 Furniture & Fixtures 540 Audio-Visual Equipment 550 Other			
Please Complete if Tagging New Asset				
School/Building Location:		Room #:		
Asset Tagged By:		Tagged Date:		
SURPLUS ASSET INFORMATION	Asset Description:	Location:		
	Serial #:	Model #:		
	Please Circle Appropriate Code		Place Asset Tag Below, if no tag, please write in Tag #	
	DM - Damaged <input checked="" type="radio"/> - Junked (End of Life) M - Missing S - Sold ST - Stolen SS - Surplus TI - Trade - In T - Transferred			
Please Complete for Surplus of Asset				
Signature:		Date: 1-14-21		
CHANGE IN ASSET LOCATION	Complete when moving equipment from location to location or from room to room within same location.			
	TAG #	Asset Description:		
	Serial #:	Model #	Add'l Information:	
	Move From: (Current Location)		Room #:	
	Move To: (New Location)		Room #:	
	Please Complete for Approval of Asset Location Change.			
Signature:		Date:		

Please Complete All Applicable Information

NEW FIXED ASSET INFORMATION	Asset Tag #: <u>10385</u>		Fiscal Year: <u>20-21</u>	
	Asset Description: <u>Refrigerant Rec. Machine</u>		PO#: _____	
	Vendor Name: _____		Asset Cost: _____	
	Manufacture: <u>ROBNR</u>		Invoice #: _____	
	Retirement/Disposal Date: _____		Serial #: <u>N/A</u>	
	Commodity Code: _____		Model #: <u>Air Pm Plus</u>	
	Asset Type & Function (Chose from below)			
	Class	Sub Class	Department	
	10 Land	110 Land	1100	Instruction
		120 Land Improvements	2100	Instructional Student Support Services
130 Infrastructure		2200	Instructional Staff Support Services	
20 Buildings	210 Buildings	2300	District Admin	
	220 Building Improvements	2400	School Administrative	
	230 Portable Buildings	2500	Business Support Services	
	240 Carpet/Tile Replacement	2600	Plant Operations & Maintenance	
30 Technology	310 KETS Technology	2700	Student Transportation	
	320 Non-KETS Technology	3100	Food Service	
	330 Copiers	3200	Enterprise Operations	
40 Vehicles	410 School Buses	3300	Community Serv. Operations (FRYSC)	
	420 Other Vehicles			
50 General	510 Rolling Stock			
	520 Food Service			
	530 Furniture & Fixtures			
	540 Audio-Visual Equipment			
	550 Other			
Please Complete if Tagging New Asset				
School/Building Location: _____		Room #: _____		
Asset Tagged By: _____		Tagged Date: _____		
SURPLUS ASSET INFORMATION	Asset Description: <u>Refrigerant Rec. Machine</u>		Location: <u>Room 26</u>	
	Serial #: <u>N/A</u>		Model #: <u>Air Pm Plus</u>	
	Please Circle Appropriate Code		Place Asset Tag Below, if no tag, please write in Tag #	
	DM - Damaged			
	J - Junked (End of Life)			
	<u>M - Missing</u>			
	S - Sold			
	ST - Stolen			
	SS - Surplus			
	TI - Trade - In			
T - Transferred				
Please Complete for Surplus of Asset				
Signature: <u>Stephanie Wood</u>		Date: <u>1.14.21</u>		
CHANGE IN ASSET LOCATION	Complete when moving equipment from location to location or from room to room within same location.			
	TAG #		Asset Description:	
	Serial #:	Model #	Add'l Information:	
	Move From: (Current Location)		Room #:	
	Move To: (New Location)		Room #:	
	Please Complete for Approval of Asset Location Change.			
	Signature: _____		Date: _____	