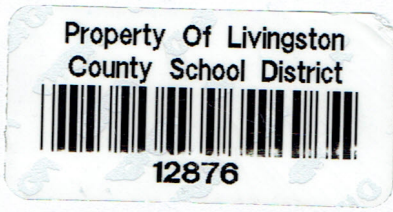


FIXED ASSET INFORMATION

Please Complete All Applicable Information

Revised 11/6/2019

NEW FIXED ASSET INFORMATION	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)			
	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>Laptop</u>		Location: <u>NLES</u>	
	Serial #: <u>5CD6330P08</u>		Model #: <u>HP Stream 11 pro 62</u>	
	Please Circle Appropriate Code			
	DM - Damaged			
	<u>J - Junked (End of Life)</u>			
	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: <u>Paul Cole</u>		Date: <u>2-2-21</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: _____	