

**MUSCOGEE COUNTY SCHOOL DISTRICT**  
**Fixed Asset Accounting System Addition Form**

**\*Inventory all items valued at \$1000.00 or more.**

Bldg. Name \_\_\_\_\_ Bldg. No. \_\_\_\_\_ Room No. \_\_\_\_\_

Program Name \_\_\_\_\_ Qty. \_\_\_\_\_

Description \_\_\_\_\_

Manufacturer (Use first 12 letters) \_\_\_\_\_

Vendor (Use first 12 letters) \_\_\_\_\_

Model (Use last 6 digits - omit dashes and spaces) \_\_\_\_\_

Serial No. (Use last 12 digits - omit dashes and spaces) \_\_\_\_\_

Acquired by: Purchase (P.O. No.) \_\_\_\_\_ Donation by \_\_\_\_\_

Transferred from \_\_\_\_\_ Date \_\_\_\_\_

Estimated cost when new \$ \_\_\_\_\_ Approximate age in years \_\_\_\_\_

Already has this tag No. \_\_\_\_\_ (DO NOT RETAG)

Inventoried by \_\_\_\_\_ Date \_\_\_\_\_ Comments \_\_\_\_\_

**FOR USE BY PROPERTY AND RECORDS ONLY**

\_\_\_\_\_ Not added, account for at building

\_\_\_\_\_ Not added, add to group totals

\_\_\_\_\_ Not added, supply information requested and resubmit

\_\_\_\_\_ Not added, already on your inventory, room No. \_\_\_\_\_

\_\_\_\_\_ Not added, already on inventory at \_\_\_\_\_, recheck information and resubmit.

Comments \_\_\_\_\_

Tag No. issued \_\_\_\_\_ Date added \_\_\_\_\_ By \_\_\_\_\_

DUPLICATE AS NEEDED