

HILLSBORO CITY SCHOOL DISTRICT
338 West Main Street
Hillsboro, OH 45133

TRANSMITTAL FORM FOR INVENTORY/FIXED ASSETS SYSTEM

TO BE COMPLETED BY TREASURER'S OFFICE

P.O.# _____ CK # _____ INVENTORY TAG # (a) _____

DATE ORDERED: _____

VENDOR: _____ PURCHASE PRICE (incl shipping): \$ _____

TO BE COMPLETED WHEN ITEM(S) ARE RECEIVED

MONTH RECEIVED: _____ QUAN: _____

ITEM DESCRIPTION: _____

ACCESSORIES: _____

NEW or USED IF USED, REPLACEMENT VALUE: _____

CONDITION: _____

SERIAL #: _____ MODEL: _____

BUILDING: _____ ROOM #: _____ REC'D BY(b) N. Edingfield

TO BE COMPLETED BY BUILDING OFFICE

SIGNATURE OF PRINCIPAL OR DESIGNEE

TODAY'S DATE

(a) INVENTORY TAGS MAY BE OBTAINED FROM PRINCIPAL OR TREASURER'S OFFICE

(b) TEACHER or OTHER PERSON RESPONSIBLE FOR THE ITEM(S)

PLEASE COMPLETE AND RETURN TO TREASURER'S OFFICE WITHIN 2 WEEKS. THANK YOU

Pending file to inventory _____