

FIXED ASSETS MANAGEMENT SYSTEM
FIXED ASSETS DISPOSAL, LOST, DAMAGED OR STOLEN FORM

Bar Code No: _____ Quantity: _____

Model No.: _____ Serial No.: _____

Item Name & Legal Description: _____
(include address if property)

DISPOSITION

Disposal Date: \$ _____

Disposal method: Sold Lost Stolen Trade-In Discarded Donated Other

Disposal price: \$ _____

Condition of Item: Excellent Good Fair Poor Destroyed

Reason for disposal: _____

Disposed to: _____

LOST, DAMAGED OR STOLEN

Discovery date: _____ Person discovering the loss: _____

Report on: Arson Theft Unexplained Loss Burglary Vandalism Failure to Return

Briefly explain circumstances: _____

Police Report Filed: Yes No Police Report Date: _____

Police Complaint No: _____

Insurance Report Filed? Yes No Date of Insurance Report: _____

Sent for Repair? Yes No Date Returned from Repair: _____

Completed by: _____
Initials Date

Authorization:

Entered into the Fixed Assets Management System Record by: _____

Initials Date

The upper portion of this form is to be completed by purchasing, accounts payable, fixed assets manager, or other in accordance with the Fixed Assets Management System Administrative Regulations. The lower portion of this form is to be completed by the fixed assets manager.