

EQUIPMENT TRANSACTION

- 1. BUDGET PURPOSE/FAS ACCOUNT CHARGED: _____
- 2. DEPARTMENT NAME: _____
- 3. CARDHOLDER NAME: _____
- 4. REQUESTED BY: _____
- 5. TRANSACTION DATE: _____
- 6. VENDOR NAME: _____
- 7. DESCRIPTION: _____
- 8. TOTAL AMOUNT CHARGED: _____
- 9. BUILDING/ROOM: _____

FOR ACCOUNTING OFFICE USE ONLY

FIXED ASSET ACCOUNTING ACCOUNT TITLE: _____

FIXED ASSET ACCOUNTING ACCOUNT NUMBER: _____

MAJOR/MINOR: _____

P-CARD NUMBER: _____

SIU NUMBER	SERIAL NO.	MODEL NO.	MFG.	BLDG. NO.	ROOM NO.

PLEASE ATTACH COPY OF SALES SLIP/INVOICE TO FORM AND FORWARD TO FIXED ASSET ACCOUNTING.