

Instructions for Using the New Fixed Asset Worksheet

Requirements for the New Fixed Asset Worksheet Detailing Each Field.

1. **CAMPUS #-** The assigned three digit number/initials of the campus or department where the item is currently physically located.
2. **ROOM #/NAME-**The assigned bar-code number found on the door jam at the entrance to a room. If unknown or not available, use the room number or description (i.e.: Classroom 2, Superintendent's Office, etc.) NOTE: If the final destination of an item is unknown, a temporary holding room may be created (i.e., Temp 999)
3. **QTY.-** The total number of items. Items that are bar-coded will always have a quantity of one. (i.e., 1 computer or 14 desk/chair combos).
4. **DESCRIPTION-** The description of an item detailing functionality and usage. Define the item with as much detail as possible (i.e., computer, IBM compatible with monitor.)
5. **MANUFACTURER-** The designer of the item. Indicate full name of the manufacturer. Do not use codes for this field (i.e., IBM, DELL, HEWLETT PACKARD, ETC.)
6. **MODEL-** Model number found on the face of the item, or, if not there, on the data plate (usually near the serial #). Do not use names. (Color-Nature Friendly C1Ø1- use C1Ø1)
7. **SERIAL #-** The identification number. Omit spaces and dashes. Place a slash mark through all zeros. Be consistent (i.e. Ø to distinguish from the letter O.)
8. **BARCODE #-**The number bar-code affixed to an asset with value of \$500 and over. Less than \$499 with usage life of 3 plus years must be inventoried without bar-code. Numeric field only (e.g., 4321)
9. **ACTUAL COST \$-** The individual cost defined by the invoice. Use total amount including cents.
10. **CHECK #-** The number identifying the check # for an asset purchase. Include the entire number of the check, if available. *(Optional)*
11. **FUNDING CODE-** The number used to define which fund was used to purchase the fixed asset. Include the entire number, or if using a partial number, be consistent when selecting only part of the funding code number. (i.e., 6600m or Title IV, XYZ Grant, Federal, etc.) *(Optional)*
12. **INVOICE #-** The vendors invoice number for the asset. Include entire number. (Only use if tracking by invoice number) *(Optional)*
13. **P.O. #-** The purchase number assigned for the particular purchase of an item. Include entire number. (Must include.)
14. **PURCHASE DATE-** The date the asset was acquired. Use format: mm/dd/yy (i.e.02/13/06)
15. **REMARKS-** Any relevant information necessary to track the asset. For example, if it is known, the item may be assigned to an individual, use this area for the individual's name and ID number.

Submit completed form to: Shanna Bergmann



NEW FIXED ASSET WORKSHEET

SCHOOL CAMPUS _____ **DATE** _____
NAME (Print) _____ **PHONE NUMBER ()** ____ - ____
FISCAL YEAR ____ - ____

CAMPUS _____	ROOM #/NAME _____	QTY _____
DESCRIPTION _____	MANUFACTURER _____	
MODEL _____	SERIAL # _____	
BARCODE # _____	ACTUAL COST \$ _____	CHECK # _____
PO # _____	INVOICE # _____	
PURCHASE DATE _____	FUNDING CODE _____	
REMARKS _____		

CAMPUS _____	ROOM #/NAME _____	QTY _____
DESCRIPTION _____	MANUFACTURER _____	
MODEL _____	SERIAL # _____	
BARCODE # _____	ACTUAL COST \$ _____	CHECK # _____
PO # _____	INVOICE # _____	
PURCHASE DATE _____	FUNDING CODE _____	
REMARKS _____		

CAMPUS _____	ROOM #/NAME _____	QTY _____
DESCRIPTION _____	MANUFACTURER _____	
MODEL _____	SERIAL # _____	
BARCODE # _____	ACTUAL COST \$ _____	CHECK # _____
PO # _____	INVOICE # _____	
PURCHASE DATE _____	FUNDING CODE _____	
REMARKS _____		