



# SPARTANBURG COUNTY SCHOOL DISTRICT 7

## Business Services

### Fixed Asset Form

School: \_\_\_\_\_ Date: \_\_\_\_\_

Description of Items: \_\_\_\_\_

Check one of the following:

Additions	<input type="checkbox"/>
Disposals	<input type="checkbox"/>
Transfers	<input type="checkbox"/>
Check Out(Take Home)	<input type="checkbox"/>

Fixed Asset Numbers:

\*\*\*Use for all, unless there is not then use serial, model, make (This will also include donated items)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Transfer To: \_\_\_\_\_ Transfer from: \_\_\_\_\_

Check out to: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone#: \_\_\_\_\_

Authorized(Principal/Administrator) By: \_\_\_\_\_

Accounting Assistant Verification/Approval \_\_\_\_\_

Date: \_\_\_\_\_

Comments: \_\_\_\_\_

Items that require long or short term storage must be cleared through Charles Gainey.

Order Completed By \_\_\_\_\_

Completion Verified by \_\_\_\_\_

Special Instructions \_\_\_\_\_

Please fax this form to Kim Parham at 594-4406 upon completion.