

ADDITIONAL ITEM FORM (AM0002)

NAME OF REQUESTOR: _____
DATE OF REQUEST: _____
ITEM DESCRIPTION: _____
ACQUISITION DATE: _____
ASSET CONDITION: _____
CATEGORY/PROFILE: _____
ASSET COST: _____
VOUCHER NUMBER: _____
SPONSOR AWARD NUMBER: _____
P.O. NUMBER: _____
ORGANIZATION/DEPT NUMBER: _____
FUND NUMBER: _____
PROJECT NUMBER: _____
PROGRAM NUMBER: _____
USER DEFINED: _____
LOCATION CODE (BLDG #-ROOM# e.g. XXX-XXX): _____
SERIAL NUMBER: _____
MANUFACTURER: _____
MODEL NUMBER: _____
CUSTODIAN/PI: _____
VENDOR: _____

Additional Comments:

Printed Name of Custodian/Principle Investigator

Signature/Date

Printed Name of Equipment Coordinator

Signature/Date

Printed Name of Relevant Dean or Vice President

Signature/Date (**required**)

Send Completed Form To:

University: Asset Management 2070 Blankenship Hall 901 Woody Hayes Drive Fax: 292-1121 Phone: 292-6048	OSURF: Asset Management 400 Research Foundation 1960 Kenny Road Fax: 292-6870 Phone: 292-0844
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See next page for Instructions

INSTRUCTIONS FOR ADDITIONAL ITEM FORM

This form is used to add item(s) to your inventory that meet the definition of capitalized equipment, but are not currently listed on your Physical Inventory Report. The definition of a capitalized asset would be any item that costs at least \$3000, has a useful life of at least two years, and is not a permanent part of a building or structure.

DEFINITIONS:

Description- A complete description of the item including type, manufacturer if known, color, and dimension.

Asset Condition- This code indicates the condition of the piece of equipment as follows:

- A1** New/Unused-Excellent Condition.
- A4** Used Property/Good Condition.
- A5** Used Property/Fair Condition.
- A6** Used Property/Poor Condition.
- F7** Minor Repairs Required/Good Condition
- F8** Considerable Repairs Required/Fair Condition
- F9** Major Repairs Required/Poor Condition
- S** Scrap/Beyond Repair.
- X** Salvage/Beyond Economic Repair.

Location: Building and room number where the equipment is located.

Serial Number: A number specific to that specific item. Can be any length and combination of numbers and letters. Usually located on the back of the equipment or under a panel.

Model: The specific model of the item. This can be either a number or a name and is usually located on the item near the serial number.

Cost: The amount paid for the item including freight and installation.

Voucher: The number assigned by Accounts Payable to initiate payment, which is put on the invoice during processing.

Acquisition Date: The date the asset invoice was paid by Accounts Payable and receipted by your department. If donated, this information is on the gift information form.

P.O. Number: The number of the Purchase Order or 100W used to obtain the equipment.

Vendor: The name of the company who sold you the equipment. In the case of a gift list Donor here.