

ALL FIELDS SHOULD BE COMPLETED

**WEBSTER COUNTY SCHOOLS
ADD ASSET FORM PURCHASE/DONATION**

REQUEST DATE: _____

ITEM DESCRIPTION: _____

LOCATION: _____ BLDG: _____ RM: _____

CLASSIFICATION/GROUP CODE: _____ / _____

MANUFACTURER: _____

MODEL NBR/NAME: _____

SERIAL NUMBER: _____

PO NBR/DONATION: _____ DATE _____

PO NBR ACTIVITY FUND _____ DATE _____ CHECK # _____

ITEM/DONATION COST: _____

VENDOR/DONOR NAME: _____

FUND _____ FUNCTION _____

COMMENTS

Entered by: _____ Date: _____