

**CAPITAN MUNICIPAL SCHOOL
INVENTORY FORM
ADD NEW ITEM**

ITEM NAME: _____

CAPITAN ID#: _____

Assigned to:
Building _____ Room _____

Description of Item:

Manufacturer: _____

Model #: _____

Serial #: _____

Purchase Price: _____

Date Purchased: _____

Purchased From: _____

P.O. #: _____ Fund Code: _____

Submitted by:

Employee Signature

Date