****

**SAVANNAH STATE UNIVERSITY**

**TITLE III**

**EQUIPMENT INVENTORY REPORT**

**GRANT PERIOD: 2017-2022**

|  |
| --- |
| **Date: 10/1/2019** |
| **Activity Title:** Choose your activity | | **Activity#:** Choose your activity number. |
| **Activity Director:** | | **Reporting Period:** Choose a reporting period |

***Note: Lists those items with an acquisition cost of $5,000 or more. Title III office requires that all computers, laptops, and printers be listed if purchased with Title III funds during this grant period.***

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Equipment**  **Description** | **Model or**  **Serial #** | **SSU ID #** | **Title III**  **ID#** | **Date**  **Purchased** | **Purchase Price** | **Equipment Location**  **(Bldg., Room)** | **Equipment Disposition**  **(Transferred, Stored, Lost)** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

This is to verify that I have physically confirmed that the items listed above are located in the building/room indicated.

I understand that I will have to verify these items for physical inventory purposes so that the property records remain updated.

**Activity Director Date**

**Title III Director Date**