**Huston-Tillotson University**

SPONSORED PROGRAMS/TITLE III

EQUIPMENT INVENTORY FORM

|  |  |
| --- | --- |
| Date: |  |

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| --- | --- |
| Project/Activity Director: |  |

|  |  |
| --- | --- |
| Project/Activity Name: |  |

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| --- | --- | --- | --- | --- | --- | --- |
| **HTU Tag #** | **Item Description** | **Serial #**  **(or Model #)** | **Cost** | **Location**  **(Bldg, Suite/Room #)** | **Purchase Date** | **Person(s) Responsible** |
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By signing below, I certify that this inventory report is true and will notify the Sponsored Programs/Title III Administration of any changes in location or use. I also understand that the above person(s) listed are responsible for the item(s) and will ensure adequate safeguards to prevent damage and theft.

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| *Signed:* |  |  |  |
|  | *Project/Activity Director’s Name* |  | *Date* |