

From: _____
 Custodian Name Unit Date

To: DIRAUX, D5-NR

Thru: _____
 DCAPT/DCDR Date

Do not include films, videos, slides, manuals and/or textbooks

1. Equipment on Hand * CONDITION CODES: G=GOOD F=FAIR P=POOR

ITEM NAME AND MODEL NUMBER	QTY	SERIAL NUMBER	CONDITION

2. The following Equipment will require replacement next year:

ITEM NAME AND MODEL NUMBER	QTY	SERIAL NUMBER	CONDITION

3. I request the following additional equipment for this unit:

 Custodian Signature

 DCAPT/DCDR Signature as applicable