

# TEXAS A&M AGRILIFE NOTICE OF CAPITAL OUTLAY

Research \_\_\_\_\_  
Extension \_\_\_\_\_

\*DEPT VOUCHER NO. \_\_\_\_\_  
\*REQUISITION NO. \_\_\_\_\_  
\*SERIAL NO. \_\_\_\_\_

*DESCRIPTION	*COST	*MANUFACTURER	*MODEL	*SERIAL NO.

*CLASS CODE	ACQ. DATE	*N/ U	*CONDITION	*AVAIL- ABILITY	*EXPOSURE	*SPECIAL LICENSE	*HOW TAGGED	*ASSET NO.	*RELATED ASSET NO.

*IN-SERVICE DATE	*UNIT NAME	*DEPT CODE	*UNIT CODE	*BLDG	*LOCATION ROOM	*GROUP CODE	*OWNER- SHIP	*RESTRIC- TION	*FAMIS SPNSR

SOURCE	%	%	%	*PURPOSE	%	%	*Research REF. NO.

“TRADE IN” ITEM NAME \_\_\_\_\_ “TRADE IN” ASSET NO. \_\_\_\_\_

“TRADE IN” ASSET VALUE \_\_\_\_\_ “TRADE IN” VALUE \_\_\_\_\_ \*LOSS OR GAIN \_\_\_\_\_

*OTHER DEPARTMENTAL INFORMATION
VENDOR _____
OTHER LOCATION _____
MAINTENANCE CO. _____
CONTRACT # _____
CONTRACT AMOUNT _____
RENEWAL DATE _____
WARRANTY EXPIRE _____
LAST MAINTENANCE _____
FREQUENCY _____
INSURED BY _____
INSURED VALUE _____
REPLACEMENT COST _____
INFLATION CODE _____

NOTES:

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\*To be filled out by Department