

Please Type All Information

SUB-BOARD 1, INC.
CAPITAL EXPENDITURE REQUISITION

No. _____

This form must be completed prior to the acquisition of any fixed asset or depreciable property. No transaction will be processed unless accompanied by this form.

ORGANIZATION _____
 DEPARTMENT _____

REQUISITION DATE _____
 PREPARED BY _____

1. FORM OF ACQUISITION (Check One)☐ **PURCHASE**

Purchased from _____

☐ **CAPITAL LEASE**

Vendor Name & Address _____

Lessor _____

Interest Rate _____ % Payments: Monthly _____ Annually _____ Other _____ Length of Lease: From _____ to _____ Date Date

Date Payments Begin _____ Periodic Payment Amount \$ _____

☐ **DONATION**

Donated by _____

Donor Name & Address _____

☐ **OTHER (Describe in Full)** _____

2. DATE OF ACQUISITION _____
 Month Day Year

3. ANTICIPATED LOCATION OF FIXED ASSET _____

4. ESTIMATED USEFUL LIFE (Check One)☐ 3 Years☐ 5 Years☐ 7 Years☐ 10 Years☐ Other _____**5. Does this acquisition involve a trade-in or retirement of currently held property?**

Yes _____ No _____

If yes, describe in full the property being traded in or retired, including: Manufacturer, Serial No., Model No., Condition & disposition of property, etc.

Trade-In Allowance: \$ _____

6. DESCRIPTION OF PROPERTY BEING ACQUIRED

Describe in full the nature and use of the property being acquired.
 Attach copy of invoice or contract, or other supporting documentation.

Complete the following, if applicable:

Manufacturer _____

Model No. _____

Serial No. _____

Color _____

7. COST OF PROPERTY ACQUIRED (Do not include interest) \$ _____

If donated, state value \$ _____

Freight Charges \$ _____ Installation Charges \$ _____

8. COMMENTS: Please provide any additional information related to this acquisition

OFFICE USE ONLY:

Fund	Department	Cost	Annual Depreciation	Asset No.	REP/Voucher

Asset Account _____ Expense Account _____

Schedule: _____