**EQUIPMENT PURCHASE NOTIFICATION FORM**

UHF Project #:

Contact:

 Name:

 Phone Number:

 School/ Unit:

Cost: $

Description:

Purpose/Use:

Location:

Make:

Model #:

Serial #:

Does property meet UH capitalization criteria for equipment set forth in APM A8.550-Capitalization:

YES NO

If YES, provide UH Account and campus code for inventory purposes:

UH Account Code/Campus Code:

Received by:

 Name (Print or type) Title

 Signature Date

Account Administrator

 Signature Date

Recorded by UH PFMO

 Signature Date