Virginia Department of Education Attachment D - Supts Memo No. 171-20

FORM NA.011 08/2008 July 10, 2020

**INVENTORY OF EQUIPMENT PURCHASED WITH STATE CTE EQUIPMENT FUNDS**

An inventory of equipment purchased with career and technical education state equipment funds must be kept using this form for all purchased items. Record/Item Numbers can be referenced from the *Recommended Equipment Approved for Career and Technical Education Programs* document under the individual program service number headings. The itemized list and invoices for each program service showing the total amount claimed on the reimbursement request must be kept on file at the school division level for audit purposes. An inventory of all equipment items purchased with state funds must be maintained in accordance with CTE Regulation (8VAC20-120-80).

School Division:

School Name:

Program Area:

Program Area:

Name of Division Superintendent or Designee (Typed):

Division Superintendent or Designee Signature:

Date:

| **Record/Item Number** | **Date**  **Purchased** | **Quantity** | **Equipment Item and Serial No.** | **Invoice Number** | **Unit Cost** | **Total Cost** |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

Virginia Department of Education Attachment D - Supts Memo No. 171-20

FORM NA.011 08/2008 July 10, 2020

**INVENTORY OF EQUIPMENT PURCHASED WITH STATE CTE EQUIPMENT FUNDS**

(Continuation Sheet)

| **Record/Item Number** | **Date**  **Purchased** | **Quantity** | **Equipment Item and Serial No.** | **Invoice Number** | **Unit Cost** | **Total Cost** |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |