CUMULATIVE EQUIPMENT ROSTER

(Name of Relief Association)	(County)

TYPE OF EQUIPMENT	CHECK NO.	DATE PURCHASED	COST		NAME OF SUPPLIER	SERIAL NUMBER	LOCATION	FINAL DISPOSITION DATE	PHYSICAL INVENTORY CHECKLIST		
									20__	20__	20__

Physical inventory completed by:	
Date completed:	

CUMULATIVE EQUIPMENT ROSTER

(Name of Relief Association)	(County)

TYPE OF EQUIPMENT	CHECK NO.	DATE PURCHASED	COST		NAME OF SUPPLIER	SERIAL NUMBER	LOCATION	FINAL DISPOSITION DATE	PHYSICAL INVENTORY CHECKLIST		
									20__	20__	20__

Physical inventory completed by:	
Date completed:	

CUMULATIVE EQUIPMENT ROSTER

(Name of Relief Association) (County)

TYPE OF EQUIPMENT	CHECK NO.	DATE PURCHASED	COST		NAME OF SUPPLIER	SERIAL NUMBER	LOCATION	FINAL DISPOSITION DATE	PHYSICAL INVENTORY CHECKLIST		
									20__	20__	20__

Physical inventory completed by:	
Date completed:	

CUMULATIVE EQUIPMENT ROSTER

(Name of Relief Association) (County)

TYPE OF EQUIPMENT	CHECK NO.	DATE PURCHASED	COST		NAME OF SUPPLIER	SERIAL NUMBER	LOCATION	FINAL DISPOSITION DATE	PHYSICAL INVENTORY CHECKLIST		
									20__	20__	20__

Physical inventory completed by:	
Date completed:	

CUMULATIVE EQUIPMENT ROSTER

(Name of Relief Association)	(County)

TYPE OF EQUIPMENT	CHECK NO.	DATE PURCHASED	COST		NAME OF SUPPLIER	SERIAL NUMBER	LOCATION	FINAL DISPOSITION DATE	PHYSICAL INVENTORY CHECKLIST		
									20__	20__	20__

Physical inventory completed by:	
Date completed:	

CUMULATIVE EQUIPMENT ROSTER

(Name of Relief Association) (County)

TYPE OF EQUIPMENT	CHECK NO.	DATE PURCHASED	COST		NAME OF SUPPLIER	SERIAL NUMBER	LOCATION	FINAL DISPOSITION DATE	PHYSICAL INVENTORY CHECKLIST		
									20__	20__	20__

Physical inventory completed by:	
Date completed:	

CUMULATIVE EQUIPMENT ROSTER

(Name of Relief Association)	(County)

TYPE OF EQUIPMENT	CHECK NO.	DATE PURCHASED	COST		NAME OF SUPPLIER	SERIAL NUMBER	LOCATION	FINAL DISPOSITION DATE	PHYSICAL INVENTORY CHECKLIST		
									20__	20__	20__

Physical inventory completed by:	
Date completed:	

CUMULATIVE EQUIPMENT ROSTER

(Name of Relief Association)	(County)

TYPE OF EQUIPMENT	CHECK NO.	DATE PURCHASED	COST		NAME OF SUPPLIER	SERIAL NUMBER	LOCATION	FINAL DISPOSITION DATE	PHYSICAL INVENTORY CHECKLIST		
									20__	20__	20__

Physical inventory completed by:	
Date completed:	

CUMULATIVE EQUIPMENT ROSTER

(Name of Relief Association)	(County)

TYPE OF EQUIPMENT	CHECK NO.	DATE PURCHASED	COST		NAME OF SUPPLIER	SERIAL NUMBER	LOCATION	FINAL DISPOSITION DATE	PHYSICAL INVENTORY CHECKLIST		
									20__	20__	20__

Physical inventory completed by:	
Date completed:	

CUMULATIVE EQUIPMENT ROSTER

(Name of Relief Association) (County)

TYPE OF EQUIPMENT	CHECK NO.	DATE PURCHASED	COST		NAME OF SUPPLIER	SERIAL NUMBER	LOCATION	FINAL DISPOSITION DATE	PHYSICAL INVENTORY CHECKLIST		
									20__	20__	20__

Physical inventory completed by:	
Date completed:	