**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