

**PERSONAL INVENTORY RECORD FOR:** \_\_\_\_\_

Date Added	Funding Source**	Item	Item Description (Brand, Model, Type, Color, etc.)	Serial# or ID#	\$Cost	Date Removed	Auth Init	Reason for Removal (storage location if item is in good condition)

**\*\*Funding Source = E (for Establishment/State Funded Items) or P (for items purchased with personal funds/gifts/donations)**

This inventory record should include any personal or household item purchased/donated for or by the individual with state or personal funds with a value of \$25 or more. Any new items must be added in a timely manner. Serial and/or ID numbers must be listed for appliances, electronics and any other items that have an identifying number. Item descriptions should include enough information to easily identify the item (brand name, color, type, size, etc.) Removal of items from personal inventory must be authorized by supervisor initials. If item is still in good condition, the storage location should be indicated .The inventory record will be reviewed for accuracy quarterly by Residential Supervisors/QA. This record will be submitted annually to the Supervisor on the 1st business day of the year.

Verified By: \_\_\_\_\_ Date: \_\_\_\_\_      Verified By: \_\_\_\_\_ Date: \_\_\_\_\_      Verified By: \_\_\_\_\_ Date: \_\_\_\_\_      Verified By: \_\_\_\_\_ Date: \_\_\_\_\_