

EQUIPMENT INVENTORY -- FORM A-6

- JAG JAG-LLE NCHIP NARIP NFSIA
 RSAT Rural SASP SORNA VAWA

Subgrantee: _____ Grant Number: _____ Project Title: _____

Item Description	Property Inventory or Serial Number	New (N) or Used (U)	Date Purchased	Cost	Voucher / Check Number	Equipment Location	Condition
Shipping & Handling Charges							
Total Cost							