

Equipment Inventory Report

The Equipment Inventory Report is due 90 days after the project period end date. A complete inventory must be submitted for all major equipment acquired or furnished under this project with a unit acquisition cost of \$5,000 or more. The inventory list must include the description of the item, manufacturer serial and/or identification number, acquisition date and cost, percentage of FFAR funds used in the acquisition of the item.

Equipment with a unit acquisition cost of less than \$5,000 that is no longer to be used in projects or programs currently or previously funded by the FFAR may be retained, sold, or otherwise disposed of, with no further obligation to FFAR. If no equipment was acquired under this award, please write a statement to that effect.



Grantee Name: Click or tap here to enter text. Grant ID: Click or tap here to enter text. Grant Period: Click or tap here to enter text. Project Title: Click or tap here to enter text. Principal Investigator: Click or tap here to enter text. Report Date: Click or tap to enter a date.

Item Description	Manufacturer	Serial Number	Quantity	Condition	Location1	Purchase Cost		Date Received
Item	Manufacturer	#	#	Choose an	enter text	\$	%	date
				item				
Item	Manufacturer	#	#	Choose an	enter text	\$	%	date
				item.				
Item	Manufacturer	#	#	Choose an	enter text	\$	%	date
				item.				
Item	Manufacturer	#	#	Choose an	enter text	\$	%	date
				item.				
Item	Manufacturer	#	#	Choose an	enter text	\$	%	date
				item.				
Item	Manufacturer	#	#	Choose an	enter text	\$	%	date
				item.				
Item	Manufacturer	#	#	Choose an	enter text	\$	%	date
				item.				
Item	Manufacturer	#	#	Choose an	enter text	\$	%	date
				item.				
Item	Manufacturer	#	#	Choose an	enter text	\$	%	date
				item.				

1Location: complete physical address.



Certification

The undersigned hereby certifies that to the best of their knowledge and belief, the above report and all supporting documents are true, accurate, and complete. I am aware there is a significant penalty for submitting false or misleading information. By checking the box below, I agree that my electronic signature is legally binding, equivalent to, and has the same validity and meaning as my handwritten signature. I will not claim otherwise.

PI Full Name: Click or tap here to enter text.

Authorized Signing Official (ASO): Click or tap here to enter text.

∠ PI Electronic Signature:	Date: Click or tap to enter a date.
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□ ASO Electronic Signature: _____ Date: Click or tap to enter a date.