

**TRI-COUNTY EDUCATIONAL SERVICE CENTER
EMERGENCY ASSISTANCE TO NONPUBLIC SCHOOLS (EANS)**

RECEIPT OF GOODS / SERVICES

School Name: _____ School IRN: _____

Vendor: _____

Invoice #: _____

Invoice Amount: _____

We have received the items or service indicated on the invoice listed above.

Authorized Signature: _____

Date: _____

INVENTORY LOG

We recognize that items purchased, not including consumables, are the property of the Ohio Department of Education and a request for their return may be made in the future. These items are not permanently affixed to our property.

ASSET INVENTORY

Asset Number	Asset Description	Serial Number