





**21<sup>st</sup> CCLC Year End  
Equipment Inventory Report**

**Grantee Name:** \_\_\_\_\_

**Supply Inventory (Aggregate of \$5000 or more)**

Serial number	Item description	Item location	Purchase Price	Percentage of 21 <sup>st</sup> CCLC federal funds used for purchase	Current value	Condition – Good, Fair, Poor

IDOE will file closeout inventory with all grant related documents. If you have any questions, please contact the office during the closeout year.

\_\_\_\_\_  
Program Director or Authorized Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Fiscal Agent or Authorized Signature

\_\_\_\_\_  
Date

Closeout Complete    YES    †    NO    †

\_\_\_\_\_  
Indiana Department of Education Signature

\_\_\_\_\_  
Date