**Arizona Governor’s Office of Highway Safety**

**Capital Outlay (Equipment) Record**

**Equipment $5,000.00 or more**

**Grant Number:**  **FFY-Program-000**

**Reporting Agency: Agency Name**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Equipment Description** | **Make/Model** | **Serial Number** | **Date Ordered** | **Date Received** | **Cost Per Unit** |
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**Note: Photographs of all Capital Outlay (Equipment) must be submitted with form.**