Form: FAACS11
Rev. 4/11/91
FIXED ASSET ACCOUNTING AND CONTROL SYSTEM (FAACS)
Location and Responsibility Form (Basis Input)

Action Code: _______ (1=Delete 2=Add 3=Change)

FAACS ID Number: __________________________

Description Line 1 __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __
Description Line 2 __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __
Description Line 3 __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __
Description Line 4 __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __

Location: Building __ __ __ __ __ Wing __ __ __ Floor __ __ __
FIPS Code __ __ __ __ __ Room __ __ __

Responsible Position __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __

Responsible Descrp. __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __

The Codes entered in the first column will automatically default unless another code is
selected

Acquisition Basis H E A
Availability Code U S A
Acquisition Method P L I C T D O N
Ownership Status A G F S C P O L
Condition Code O I
Tag Indicator Y N

**For Disposal of Assets Only**

<table>
<thead>
<tr>
<th>DISPOSAL INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disposal Date ______</td>
</tr>
<tr>
<td>M M D D Y Y Y Y Y Y</td>
</tr>
<tr>
<td>Disposal Proceeds __</td>
</tr>
<tr>
<td>Disposal Code S A L T C K</td>
</tr>
<tr>
<td>Disposal Quantity __ __</td>
</tr>
<tr>
<td>Disposal Description __ __ __ __ __ __ __ __ __ __ __ __</td>
</tr>
</tbody>
</table>

Nomenclature Code __ __ __ __ __ __ __ __ __ __

Code Indictor __ P. O. Number __ __ __ __ __ __ __ __ __ __
Useful Life __ __ __ Organization __ __ __ __ __ __ __ __ __ __
Surplus Date ______ Last Inventory Date ________
M M D D Y Y Y Y M M D D Y Y Y Y

Completed By: ____________ Approved By: ____________ Keyed By: _______
Date Completed ____________ Date Approved: ____________ Date Keyed: _______