

The University of Texas at Dallas
Equipment Screening Certification

EXHIBIT E29

REQUISITION NO.
REQUESTED BY:

P.O. NO.
DEPT.:

ACCOUNT NUMBER(S)

VALUE:

DESCRIPTION OF EQUIPMENT:

COMPLETE THE APPROPRIATE SECTION

For Equipment items costing at least \$500 but not more than \$1000
The above described item of equipment has been screened against the Department inventory. No such item or substantially similar item is available for shared use.

_____ Date
Program Head/Center Director of Equivalent

For equipment items costing at least \$1000 but not more than \$5000
The above described item of equipment has been screened against the University's inventory. No such item or substantially similar item is available for shared use.

_____ Date
Dean/Director/Vice President

For equipment items costing in excess of \$5000
The above described item of equipment has been screened against the inventory of UT-Dallas.

_____ No such item or substantially similar item is owned by the University.

_____ Items similar to the above described equipment are owned by the University and may be available for shared use:

Location: _____

Custodian: _____

_____ Date
Property Administrator