

# ANNUAL EQUIPMENT INVENTORY REPORT

## Michigan Department of Public Health Center for Substance Abuse Services

**Instructions for MDCH Equipment Inventory Report:** This form must be completed annually by all performance reimbursement providers and submitted to the CMHSP within 30 days of the new contract. *Equipment* means tangible, nonexpendable, personal property having a useful life of more than one (1) year and an acquisition cost of \$5,000 or more per unit, and purchased in whole or part with MDCH funds under an expenditure reimbursement contract.

**Provider Name/Site:**

**Fiscal Year Ending:**

Equipment Item	Date of Purchase	Cost	Funding Source(s)	Remarks

### CERTIFICATION STATEMENT

On behalf of the above mentioned provider, I certify that there are no misrepresentations or falsifications in the information stated in the above listing.

**Authorized Signature and Title**

**Date**