

CALIFORNIA

OTHER EQUIPMENT INFORMATION

1. Will equipment be purchased or leased? Purchased Leased

2. Does the equipment have a useful life of one year or more? Yes No
(Supplies and other consumables with a useful life of less than one year do not qualify)

3. Location of the equipment. Will special facilities need to be built or special building modifications made to install, use or maintain the equipment? If yes, please explain.

4. Will the equipment be used outside California? If so, please explain.

5. Will the equipment be used in non-research activities?

- To provide instruction on previously researched information Yes No
- To provide patient care or treatment Yes No
- For administrative, management or marketing purposes Yes No
- For any other non-research (please describe the purpose) Yes No

a. If yes, please explain.

b. Please estimate the percentage of time that the equipment will be used for any non-research activities:

Research activities _____ %

Non-research activities _____ %

Approved by Tax Services Yes No

Signed: _____

Date: _____

If you need assistance with completing the Checklist, please contact Tax Services at 562.985.4211.