

PROPERTY DISPOSAL REPORT

DEPARTMENT OF FINANCE BUREAU OF PROCUREMENT TRANSACTION NUMBER

| AGENCY NAME | | | BUREAU NAME | | | | - | DIVISION NAME | | | |
|-----------------|-------------|--|-------------|-------------------------------|------------------|--|------------|-------------------|---|---|--|
| LOCATION OF STR | | STREET A | EET ADDRESS | | CITY, STATE, ZIP | | | | AGENCY BUDGET ACCOUNT NO. (To deposit proceeds, if any) | | |
| EXCES | SS PROPERTY | ľ | | | | | | | | | |
| PROPE | RY CODES | CONDITION (CO E = EXCELLENT G = GOOD | | U = UNUSABLE | 1 | | FER (Inter | <i>rnal)</i> 3. S | TION (DISP.) ALVAGE 5. DONATIC CRAP | ${ m ON}$ (Formal letter from entity required) | |
| QTY | | | CRIPTION O | F PROPERTY bany each item) | | | COND. | DISP. | GRANT PURCHASE (Provide copy of grant) | METHOD OF DISPOSITION (For office use only) | |
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| FOR ADDITIONAL INFORMATION OR TO ARRANGE FOR INSPECTION OF PROPERTY, CONTACT | NAME | PHONE |
|--|------|-------|
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| Α | GENCY COORDINATOR | | Α | GENCY/BUREAU HEAD | |
|------|-------------------|------|------|-------------------|------|
| NAME | SIGNATURE | DATE | NAME | SIGNATURE | DATE |
| | | | | | |
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| NAME - BOP AUTHORIZED AGENT | | COMMENTS |
|-----------------------------|------|----------|
| (For office use only) | | |
| SIGNATURE | DATE | |
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