

**HIDALGO COUNTY, TEXAS  
ASSET TRANSFER FORM**

<b>TRANSFER TO:</b>	<b>DEPARTMENT NAME</b> <u>Surplus for Disposal Landfill</u>	<b>LOCATION</b> <u>1601</u>
<b>TRANSFER FROM:</b>	<u>Pct. 3</u>	<u>123</u>
<b>CONTACT INFORMATION:</b>		
<b>NAME (PRINT)</b> <u>Victor Gallardo</u>	<b>FAX NO.:</b> _____	<b>E-MAIL:</b> <u>victor</u>
<b>SAFETY DIVISION (FOR SURPLUS OF VEHICLES):</b> <b>INITIAL BY STAFF:</b> _____ <b>DATE:</b> _____		<b>ORIGINAL SIGNED DOCUMENT</b> <b>(NO FAXES OR E-MAILED DOCUMENTS)</b>

#	DESCRIPTION OF ITEM	INVENTORY TAG NO.	SERIAL NO./ VIN	CURRENT CONDITION	PALLET INFO.	ALIO LOC #	FIXED ASSET
1	Kimball Model#90-Exec Desk	010425					
2	Fairfield #1039-Brown (Exe Chair)	020871					
3	File Cabinet 4 Drw Gray Legal HON	024773					
4	Desk - Secretarial	AA001357					
5	Desk	ME001071					
6	End Table	ME001391					
7	Credenza	ME001440					
8	Desk Left Pedestal						
9	Desk						
10	Exe Black Chair						
<b>JUSTIFICATION FOR TRANSFER:</b> _____							<b>FR</b>
							<b>DEPT.</b> _____

*Note: Condition of items: (G) = Good working condition, (F) = Fair condition, and (B) = Broken*

**AMOUNT \$** \_\_\_\_\_

**PLEASE USE BLUE INK TO SIGN**

The transfer is hereby approved  
by the Purchasing Agent

MARTHA L. SALAZAR

PRINT NAME

SIGNATURE

DATE

Contact Person transferring  
item(s) out

PRINT NAME

SIGNATURE

DATE

Person receiving Item(s)

PRINT NAME

SIGNATURE

DATE

Reviewed & Processed by FA  
Division

PRINT NAME

SIGNATURE

DATE

**PLEASE SUBMIT ORIGINAL TO THE PURCHASING DEPT. ATTN: FIXED ASSET DIVISION**

**HIDALGO COUNTY ADMINISTRATION BUILDING - 2812 S. BUSINESS 281, EDINBURG, TX 78539**

**HIDALGO COUNTY, TEXAS  
ASSET TRANSFER FORM**

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<b>SAFETY DIVISION (FOR SURPLUS OF VEHICLES):</b> <b>INITIAL BY STAFF:</b> _____ <b>DATE:</b> _____		<b>ORIGINAL SIGNED DOCUMENT</b> <b>(NO FAXES OR E-MAILED DOCUMENTS)</b>

INVENTORY

SERIAL NO./

CURRENT

PALLET

ALIO

FIXED ASSET

	DESCRIPTION OF ITEM	TAG NO.	VIN	CONDITION	INFO.	LOC #
1	Exe Black Chair Metal					
2	Exe Chair Black Wood					
3	Exe Chair Burgundy					
4	Exe Chair Plastic					
5	Fire Safe Sentry					
6	Folding Table					
7	Hutch Black					
8	Hutch Maintenance Made					
9	Shelving / Cabinet					
10	Desk Top (Broken)					

JUSTIFICATION FOR TRANSFER: \_\_\_\_\_

FR

DEPT. \_\_\_\_\_

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HIDALGO COUNTY, TEXAS  
ASSET TRANSFER FORM

DEPARTMENT NAME		LOCATION
TRANSFER TO:	Surplus for Disposal Landfill	1601
TRANSFER FROM:	Pct. 3	123
CONTACT INFORMATION:		
NAME (PRINT Victor Gallardo	FAX NO.:	E-MAIL:victor
SAFETY DIVISION (FOR SURPLUS OF VEHICLES):		ORIGINAL SIGNED DOCUMENT (NO FAXES OR E-MAILED DOCUMENTS)
INITIAL BY STAFF:	DATE:	

	DESCRIPTION OF ITEM	INVENTORY TAG NO.	SERIAL NO./ VIN	CURRENT CONDITION	PALLET INFO.	ALIO LOC #
1	Shelf					
2	Water heater					
3	Toilets ( 7 )					
4						
5						
6						
7						
8						
9						

10

JUSTIFICATION FOR TRANSFER:

FR

DEPT.

AMOUNT \$

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**TF#** \_\_\_\_\_

r.gallardo@co.hidalgo.tx.us

**ENT TO BE ACCEPTED ONLY  
(MENTS WILL BE ACCEPTED)**

**SSET DIVISION USE ONLY**

<b>FUND NO.</b>	<b>COST</b>	<b>P/U</b>	<b>LOC</b>
_____	_____		
_____	_____		
_____	_____		
_____	_____		
_____	_____		
_____	_____		
_____	_____		
_____	_____		
_____	_____		
_____	_____		

**OM** \_\_\_\_\_ **TO** \_\_\_\_\_  
\$ \_\_\_\_\_

**TO BE INITIALLED BY CONTACT PERSON  
WHEN ITEMS ARE REMOVED FROM THE  
PREMISES.**

\_\_\_\_\_

**DATE** \_\_\_\_\_ **INITIAL** \_\_\_\_\_

**EFFECTIVE DATE 03/01/13**

**TF#** \_\_\_\_\_

r.gallardo@co.hidalgo.tx.us

**ENT TO BE ACCEPTED ONLY  
(MENTS WILL BE ACCEPTED)**

**SSET DIVISION USE ONLY**

**FUND**



OM	TO
_____	
\$	
_____	

<b>TO BE INITIALED BY CONTACT PERSON WHEN ITEMS ARE REMOVED FROM THE PREMISES.</b>	
_____	_____
<b>DATE</b>	<b>INITIAL</b>

**EFFECTIVE DATE 03/01/13**