

HIDALGO COUNTY, TEXAS
ASSET TRANSFER FORM

DEPARTMENT NAME _____ LOCATION _____

TRANSFER TO: SURPLUS - DISPOSAL THRU LANDFILL 9999

TRANSFER FROM: TAX OFFICE 140

TF# _____

NAME (PRINT) TOMAS MARTINEZ CONTACT INFORMATION: 956-289-7471 FAX NO.: _____

E-MAIL: TOMAS@HIDALGOCOUNTYTAX.ORG

SAFETY DIVISION (FOR SURPLUS OF VEHICLES):
INITIAL BY STAFF: _____ DATE: _____

ORIGINAL SIGNED DOCUMENT TO BE ACCEPTED ONLY
(NO FAXES OR E-MAILED DOCUMENTS WILL BE ACCEPTED)

DESCRIPTION OF ITEM	INVENTORY TAG NO.	SERIAL NO./ VIN	CURRENT CONDITION	FIXED ASSET DIVISION USE ONLY					
				PALLET INFO.	ALIO LOC #	FUND NO.	COST	P/U	LOC
1 11x RETRACTA BELT CROWD POSTS	53258.53259		B						
2 ADJUSTABLE METAL SHELVING	14930		B						
3 WHITE HON 4 DRAWER FILE CABINET		M01GWV	B						
4 BLACK HON 4 DRAWER FILE CABINET		C419WA	B						
5 BLACK SAFCO ROLLING FILE DRAWER			B						
6 CORNER WORK DESK WITH HUTCH			B						
7 CORNER WORK DESK WITH HUTCH			B						
8 WHITE HON 4 DRAWER FILE CABINET		CXT068	B						
9 WHITE GLOBAL 4 DRAWER CABINET		H514PL	B						
10 WOOD DESK			B						

JUSTIFICATION FOR TRANSFER: WATER DAMAGE FROM FLOOD

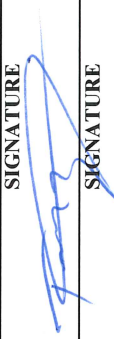
DEPT. _____ FROM _____ TO _____

AMOUNT \$ _____

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

PLEASE USE BLUE INK TO SIGN

The transfer is hereby approved by the Purchasing Agent MARTHA L. SALAZAR

Contact Person transferring item(s) out: TOMAS MARTINEZ SIGNATURE  DATE 8/8/18

Person receiving Item(s): _____ SIGNATURE _____ DATE _____

Reviewed & Processed by FA Division: _____ SIGNATURE _____ DATE _____

INITIAL _____ DATE _____ INITIAL _____

EFFECTIVE DATE 03/01/13

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

TRANSFER TO: SURPLUS - DISPOSAL THRU LANDFILL	DEPARTMENT NAME	LOCATION
TRANSFER FROM: TAX OFFICE		9999
		140
	CONTACT INFORMATION:	TF# _____
	NAME (PRINT): TOMAS MARTINEZ	E-MAIL: TOMAS@HIDALGOCOUNTYTX.ORG
	956-289-7471	FAX NO.:
SAFETY DIVISION (FOR SURPLUS OF VEHICLES):		
INITIAL BY STAFF: _____ DATE: _____		

**ORIGINAL SIGNED DOCUMENT TO BE ACCEPTED ONLY
(NO FAXES OR E-MAILED DOCUMENTS WILL BE ACCEPTED)**

INVENTORY TAG NO.	SERIAL NO./ VIN	CURRENT CONDITION	FIXED ASSET DIVISION USE ONLY			
			ALJO LOC #	FUND NO.	COST	P/U LOC
11 WOOD PEDESTAL STAND		B				
12 HON BOOKCASE	CRASTU	B				
13 HON ROLLING CART		B				
14 WOOD PRINTER STAND		B				
15 WOOD PRINTER STAND		B				
16 WHITE HON 4 DRAWER FILE CABINET	M51GWV	B				
17 GLOBAL STORAGE LOCKER CABINET		B				
18 GLOBAL STORAGE LOCKER CABINET		B				
19 SAFE MODEL F1-D	1Y63254	B				
20 ADJUSTABLE METAL SHELVING	14931	B				

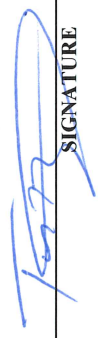
JUSTIFICATION FOR TRANSFER: WATER DAMAGE FROM FLOOD

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The transfer is hereby approved by the Purchasing Agent

PRINT NAME: MARTHA L. SALAZAR

SIGNATURE: 

DATE: 8/8/18

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

Contact Person transferring item(s) out

PRINT NAME: TOMAS MARTINEZ

SIGNATURE: _____

Person receiving Item(s)

PRINT NAME: _____

SIGNATURE: _____

Reviewed & Processed by FA Division

PRINT NAME: _____

SIGNATURE: _____

DATE: _____

DATE: _____ INITIAL: _____

EFFECTIVE DATE 03/01/13

**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

DEPARTMENT NAME _____ LOCATION _____

TRANSFER TO: SURPLUS - DISPOSAL THRU LANDFILL 9999

TRANSFER FROM: TAX OFFICE _____ TFF# _____

NAME (PRINT) TOMAS MARTINEZ CONTACT INFORMATION: FAX NO.: _____

E-MAIL: TOMAS@HIDALGOCOUNTYTAX.ORG

SAFETY DIVISION (FOR SURPLUS OF VEHICLES): ORIGINAL SIGNED DOCUMENT TO BE ACCEPTED ONLY
INITIAL BY STAFF: _____ DATE: _____ (NO FAXES OR E-MAILED DOCUMENTS WILL BE ACCEPTED)

INVENTORY TAG NO.	SERIAL NO./ VIN	CURRENT CONDITION	FIXED ASSET DIVISION USE ONLY					
			PALLET INFO.	ALJO LOC #	FUND NO.	COST	P/U	LOC
21	ADJUSTABLE METAL SHELVING 29565	B						
22	ADJUSTABLE METAL SHELVING 29564	B						
23	ADJUSTABLE METAL SHELVING 29570	B						
24	ADJUSTABLE METAL SHELVING 29569	B						
25	ADJUSTABLE METAL SHELVING 29559	B						
26	ANDERSON 4 DRAWER FILING CABINET	B						
27	WOOD DESK AND HUTCH	B						
28	WOOD DESK AND HUTCH	B						
29	HON WORKDESK 3V8FCU	B						
30	ROLLER DESKTOP	B						

DEPT. _____ FROM _____ TO _____

AMOUNT \$ _____

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PLEASE USE BLUE INK TO SIGN

The transfer is hereby approved by the Purchasing Agent

PRINT NAME: MARTHA L. SALAZAR SIGNATURE: _____ DATE: 8/8/18

Contact Person transferring item(s) out: TOMAS MARTINEZ SIGNATURE: _____ DATE: _____

Person receiving Item(s): _____ SIGNATURE: _____ DATE: _____

Reviewed & Processed by FA Division: _____ SIGNATURE: _____ DATE: _____

INITIAL: _____ DATE: _____

EFFECTIVE DATE 03/01/13

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

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**

TRANSFER TO: SURPLUS - DISPOSAL THRU LANDFILL	DEPARTMENT NAME	LOCATION
TRANSFER FROM: TAX OFFICE		9999
		140
TF# _____		
NAME (PRINT): TOMAS MARTINEZ		
CONTACT INFORMATION:		
PHONE: 956-289-7471	FAX NO.:	E-MAIL: TOMAS@HIDALGOCOUNTYTX.ORG
SAFETY DIVISION (FOR SURPLUS OF VEHICLES):		
INITIAL BY STAFF: _____ DATE: _____		

**ORIGINAL SIGNED DOCUMENT TO BE ACCEPTED ONLY
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DESCRIPTION OF ITEM	INVENTORY TAG NO.	SERIAL NO./ VIN	CURRENT CONDITION	FIXED ASSET DIVISION USE ONLY					
				PALLET INFO.	ALJO LOC #	FUND NO.	COST	P/U	LOC
31 BLACK 3 DRAWER FILE CABINET		C1M5QT	B						
32 HON WORKDESK		C7C6DB	B						
33 WHITE PRINTER STAND			B						
34 3 SHELF WOOD CABINET			B						
35 3 SHELF WOOD CABINET			B						
36 3 SHELF WOOD CABINET			B						
37 3 SHELF WOOD CABINET			B						
38 3 SHELF WOOD CABINET			B						
39 GREY MOBILE COMPUTER DESK			B						
40 HON WORKSTATION		M3J7MS	B						
JUSTIFICATION FOR TRANSFER: WATER DAMAGE FROM FLOOD				FROM		TO			
				DEPT.					
				AMOUNT \$		\$			

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

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The transfer is hereby approved by the Purchasing Agent	MARTHA L. SALAZAR	DATE
Contact Person transferring item(s) out	TOMAS MARTINEZ	8/8/18
Person receiving Item(s)		
Reviewed & Processed by FA Division		

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

DATE _____ **INITIAL** _____

EFFECTIVE DATE 03/01/13

**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

TRANSFER TO: SURPLUS - DISPOSAL THRU LANDFILL	DEPARTMENT NAME	LOCATION
TRANSFER FROM: TAX OFFICE		9999
		140
		TF# _____
CONTACT INFORMATION:		
NAME (PRINT) TOMAS MARTINEZ	956-289-7471	FAX NO.:
E-MAIL: TOMAS@HIDALGOCOUNTYTAX.ORG		
SAFETY DIVISION (FOR SURPLUS OF VEHICLES):		
INITIAL BY STAFF: _____ DATE: _____		

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DESCRIPTION OF ITEM	INVENTORY TAG NO.	SERIAL NO./ VIN	CURRENT CONDITION	FIXED ASSET DIVISION USE ONLY					
				PALLET INFO.	ALJO LOC #	FUND NO.	COST	P/U	LOC
41 ANDERSON ROLLING DESK			B						
42									
43									
44									
45									
46									
47									
48									
49									
50									

DEPT.	FROM	TO
AMOUNT \$		\$

JUSTIFICATION FOR TRANSFER: WATER DAMAGE FROM FLOOD

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Contact Person transferring item(s) out

Person receiving Item(s)

Reviewed & Processed by FA Division

MARTHA L. SALAZAR	SIGNATURE	DATE
TOMAS MARTINEZ		
	SIGNATURE	DATE
	SIGNATURE	DATE
	SIGNATURE	DATE

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

DATE _____ INITIAL _____

EFFECTIVE DATE 03/01/13

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

HIDALGO COUNTY, TEXAS
ASSET TRANSFER FORM

DEPARTMENT NAME _____ LOCATION _____

TRANSFER TO: SURPLUS _____ 1601 _____

TRANSFER FROM: TAX OFFICE _____ 140 _____

TF# _____

CONTACT INFORMATION: NAME (PRINT) TOMAS MARTINEZ FAX NO.: _____

E-MAIL: TOMAS@HIDALGOCOUNTYTX.ORG

ORIGINAL SIGNED DOCUMENT TO BE ACCEPTED ONLY
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SAFETY DIVISION (FOR SURPLUS OF VEHICLES):
INITIAL BY STAFF: _____ DATE: _____

FIXED ASSET DIVISION USE ONLY			
DEPT.	FROM	TO	AMOUNT \$
1	RICOH MP2555 COPIER	C85134321	B
2	RICOH MP5055SP COPIER		B
3			
4			
5			
6			
7			
8			
9			
10			

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Contact Person transferring item(s) out

Person receiving Item(s)

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PRINT NAME: MARTHA L. SALAZAR SIGNATURE: _____ DATE: 8/8/18

PRINT NAME: TOMAS MARTINEZ SIGNATURE: _____ DATE: _____

PRINT NAME: _____ SIGNATURE: _____ DATE: _____

PRINT NAME: _____ SIGNATURE: _____ DATE: _____

DATE: 8/8/18 INITIAL: _____

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