Williamson County

Print Form

| | Asset Stat | us Change Form | | |
|---------------------------------|--|--|-----------------|---|
| The service contribution of the | owing asset(s) is(are) considered for: (select o | | | |
| | FER bet ween county departments (TRADE-IN for a County the earliest auction * CONATION to | new assets of similar type for the county o a non-county entity | C DEST Publi | RUCTION due to c Health / Safety |
| Asset Li | ist: | | | |
| Quantity | Description (year, make, model, etc.) | Manufacturer ID# (serial, service tag, or VIN) | County Tag# | Condition of Assets (Working, Non- Working) |
| 1 | 2004 PRINTECH PRINTER FORMSMASTER 8003se | #ZBE69736 | 38291 | Working |
| 1 | PRINTECH PRINTER STAND | | | Working |
| 1 | 1998 SIGNATURE/BURSTER FORMAX WITH STAND | #FE210619 | 42090 | Working |
| | | | | |
| | | | | |
| | involved: Transferor Department): TREASURER | | | |
| | or - Elected Official/Department Head/ zed Staff: | Contact Person: | | |
| VIVIAN V | | ROSE HAVELKA | | |
| Print Nar | cian L. Mood February 27 | Print Name 7, 2012 +1 (512) 943-1589 | | |
| Signatur | e | Date Phone Number | | |

TO (Transferee Department/Auction/Trade-in/Donee): AUCTION

Transferee - Elected Official/Department Head/

Authorized Staff OR Donee - Representative: (If being

approved for Sale or Trade-in, no signature is necessary.)

Contact Person:

Print Name

Print Name

Signature

Date Phone Number

Forward to County Auditor's Office

| This Change Status was approved as agenda item # | in Commissioner's Court on | |
|--|----------------------------|--|
| f for Sale, the asset(s) was(were) delivered to warehouse on | by | |

^{*} If the above asset(s) is (are) listed for sale at auction and no bids are made, the Purchasing Director may dispose of or donate this (these) asset(s). A list of the (these) asset(s) to be donated or disposed of will be sent to the Auditor's Office with a date of donation or disposal.

17" Monitor, Dell

17" Monitor, Dell

Williamson County

Print Form

Working)

Working

Tag#

None

None

Asset Status Change Form

| The following | asset(s) is(are) conside | | (one) | | |
|---------------|----------------------------------|------------|---|----------------|---------------------------------------|
| Gene- | | | or new assets of similar type for the county | DECT | DICTION due to |
| SALE at the e | arliest auction * | C DONATION | to a non-county entity | OPubli | RUCTION due to c Health / Safety |
| Asset List: | | | | | |
| Quantity | Description (year, make, mode | | Manufacturer ID# (serial, service tag, or VIN) | County Tag# | Condition of Assets (Working, Non- |

CN-OPM372-72872-7C3-336I

MX-08G152-47605-36B-DWF3

Working Computer, Dell VFBGG-3XR9T-WM473-B7609-9VG73 00418 Working Keyboard & Mouse, Dell TH-02R400-37171-2BR-1836 None Working Speakers, Dell Model A215 None Working **Parties involved:** FROM (Transferor Department): CCL #2 Transferor - Elected Official/Department Head/ **Authorized Staff: Contact Person:** Tim L. Wright Kevin J Kracht Print Name **Print Name** 943-1410 Signature Date Phone Number TO (Transferee Department/Auction/Trade-in/Donee): Auction Transferee - Elected Official/Department Head/ Authorized Staff OR Donee - Representative: (If being approved for Sale or Trade-in, no signature is necessary.) **Contact Person: Print Name** Print Name Signature Date Phone Number

Forward to County Auditor's Office

* If the above asset(s) is (are) listed for sale at auction and no bids are made, the Purchasing Director may dispose of or donate this (these) asset(s). A list of the (these) asset(s) to be donated or disposed of will be sent to the Auditor's Office with a date of donation or disposal.

| This Change Status was approved as agenda item # | in Commissioner's Court on | |
|---|----------------------------|--|
| If for Sale, the asset(s) was(were) delivered to warehouse on | by | |

Williamson County

Print Form

Asset Status Change Form

| ○ TRANSFER | ng asset(s) is(are) considered bet ween county departments e earliest auction * | | 5.35 | ounty | O DEST Publi | RUCTION due to c Health / Safety |
|----------------------------|---|--------------------------|---|---------|-----------------|---|
| Asset List: | | | | | | |
| Quantity | Description (year, make, model, etc. |) | Manufacturer ID# (serial, service tag, or VIN) |) | County Tag# | Condition of Assets (Working, Non- Working) |
| see | attached spreadsheet | | | | | Non-Working |
| | | | | | | Non-Working |
| | | | | * | | Non-Working |
| | | | | | | Non-Working |
| | | | | | | Non-Working |
| | sferor Department): 570 Correction | | | | | |
| Authorized | Elected Official/Department Staff: | Head/ | Contact Person: | <u></u> | - OE! | |
| LC Marshall Print Name | 100 | | Emily Hajda Print Name | | \$ | 3 9 |
| 201 | Mansfall | January 31, 2012 | +1 (512) 943-1324 | | FFB 23 | 2012 |
| Signature | v V | | Phone Number | | | DE |
| TO (Transfere | ee Department/Auction/Trade-in/I | Donael: ALICTION | | -1 | + 50 | , VIY, TEXAS |
| Transferee - Authorized | Elected Official/Department Staff OR Donee - Representat Sale or Trade-in, no signature is ne | Head/ tive: (If being | Contact Person: | | | |
| Print Name | | | Print Name | | | |
| Signature | | Date | Phone Number | | | |
| | asset(s) is (are) listed for sale at au of the (these) asset(s) to be donate | | | | | |
| | Forward | to Count | ty Auditor's | Offi | ce | |
| This Change S | itatus was approved as agenda ite | em # in Com | missioner's Court on | | | |
| If for Sale, the | asset(s) was(were) delivered to w | arehouse on | by | | | |

| Quantity | Description (year, make, model, etc.) | Manufacturer ID # (serial, service tag, or VIN) | County Tag# | Condition of Assets (working, non- working, unk) |
|----------|---|---|----------------|--|
| 59 | BDU and 5.11 pants (faded, stained, worn) | n/a | n/a | non-working |
| 46 | Tactical Shirts (stained, old style, faded) | n/a | n/a | non-working |
| 7 | Class A Shirts L/S (worn, stained) | n/a | n/a | non-working |
| 5 | Class B Shirts S/S (stained, zipper broken) | n/a | n/a | non-working |
| 5 | Class A Pants (pockets ripped, worn, holes) | n/a | n/a | non-working |
| 7 | Clerk Shirts (stained, worn, faded) | n/a | n/a | non-working |
| 4 | Windbreakers (holes, worn) | n/a | n/a | non-working |
| | | | | |
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Williamson County

Print Form

Asset Status Change Form

| | | | ssets of similar type for the county | © DEST | RUCTION due to c Health / Safety |
|--------------|--|----------------------------|---|---------------------------------------|---|
| (SALE a | t the earliest auction * | C DONATION to a nor | n-county entity | Publi | c Health / Safety |
| | | | | | |
| Asset L | ist: | | | | |
| Quantity | Descripti (year, make, ma | | Manufacturer ID# (serial, service tag, or VIN) | County Tag# | Condition of Assets (Working, Non- Working) |
| 9 | Juvenile Mattresses | | | | Non-Working |
| 2 | Box juvenile t-shirts | | | | Non-Working |
| 2 | Bag undergarments | | | | Non-Working |
| 1 | Box juvenile bras | | | | Non-Working |
| 1 | Box stained, torn bath towels | | | | Non-Working |
| Parties i | nvolved: | | | | |
| FROM (T | ransferor Department): Juven | ile Detention | | | |
| | or - Elected Official/Depar | | | <u> </u> | |
| | ed Staff: | | Contact Person: | | |
| Frances Ja | | | Cheryl Wright | | |
| Print Nar | |) | Print Name | | |
| Signatur | ruck forsen | / | +1 (512) 943-3252 Phone Number | | |
| Jigriatur | <i>/</i> | Date | Phone Number | | |
| TO (Trans | feree Department/Auction/Tr | ade-in/Donee): Destruction | | | |
| Transfer | ee - Elected Official/Depa | rtment Head/ | | · · · · · · · · · · · · · · · · · · · | |
| | ed Staff OR Donee - Repr for Sale or Trade-in, no signat | | Contact Person: | | |
| | , 3 | ····, | Contact i Cisoni | | |
| Print Nan | ne | | Print Name | | |
| Signature | 3 | Date | Phone Number | | |
| | | | made, the Purchasing Director may be sent to the Auditor's Office with | | |
| | | | | | 1 |
| | Forw | ard to Count | ty Auditor's Offi | ce | |
| This Chan | ge Status was approved as ag | enda item # in Comi | missioner's Court on | | |
| If for Sale. | the asset(s) was(were) deliver | ed to warehouse on | by | | |



Williamson County Vehicle Status Change Form

To be completed by **department** releasing vehicle:

|) Identify Vehicle: | | | | |
|--|---------------------------------------|-----------------------|---------------|-------------|
| 00350278 | | 210 | | UF0002/1802 |
| Vehicle Identification Num | ber | Departn | nent | Door Number |
| 9032576 | 2000 | CIMLINE | 225D | RED - |
| License Plate Number | Year | Make | Model | Color |
|) Reason for Status Change: | | | | |
| Accident | | | | |
| 2. The Offi | cial Accident Re le Insurance / Li | tigation Release Form | | - |
| Not mechanically soun | d | | | |
| ☑ Other: Explain Unit has | reached the en | d of its life cycle | | , |
| Elected Official/Departmer Print TERRON EVERTSON | | ized Staff Signature | now Cutson Di | ate 2/23/12 |

| 1) Method of Status Change: This vehicle is to be conside | red for: (Select one) |
|---|---|
| SALVAGE for parts / SALE at the earliest auction based on Fleet's recommendation | ○ TRANSFER between county departments |
| C TRADE-IN for new assets of same general type for the county | Comments: |
| C SALE to a government entity / civil or charitable | Receiving Department: |
| organization in the county at fair market value OTHER | Elected Official/Department Head/Authorized Staff or Donee - Representative; |
| 1 Office | - Print Name: |
| | Signature and Date: |
| | Contact name and Number: |
| 2) Vehicle Marked for Auction and moved to Auction? Forward forms and reports to County Auditor's Offi | |
| Print RODGENS Signature | 120 Date 2-23-12 |



1) Identify Vehicle:

Williamson County Vehicle Status Change Form

To be completed by **department** releasing vehicle:

| 210 UB0030 |
|--|
| Department Door Number |
| F250 RCAB WHITE |
| Model Color |
| |
| |
| h/Vandalism Report e Form |
| |
| |
| |
| |
| |
| Jerron Cuitos Date 2/23/12 |
| 72/2 |
| ,, |
| Services Manager - Mike Fox |
| red for: (Select one) |
| ○ TRANSFER between county departments |
| Comments: |
| Receiving Department: |
| Elected Official/Department Head/Authorized Staff or Dor |
| Representative: |
| Print Name: |
| Signature and Date: |
| Contact name and Number: |
| |
| Yard ce |
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