## CITY-PARISH GOVERNMENT

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Agency: MOSQUITO ABATEMENT	Fixed Movable Asset Form	Page of
A*	CITY-PARISH GOVENNMENT	Divarden
Movable Assets Acqu	isition, Departmental Move, Disposition and Correction F	Page of handred
A	As Needed Correct Section A, B, or C of	the FMA Form:
Date:	Circle your Corrections:  Property Tag# 108687	Correction
GMC St.	erva Plu	
Serial No./VINE	C14X05Z279432	
	Properly Manager: Class Code: 7201	7048
2 2 2 4 (digits)	(Code)	. •
A Marie Carlo Control of Control	/ehicle and Equipment: Make: Model:	Sierra
DEPUDIV.#_MARC	Date Rectór PO ≢ Date:	
Year 2,005 Equipment	No. 5 MRGO License No. 196871	
В	DEPARTMENTAL MOVE (or) TRANSFER	
Department	DEPARTMENTAL MOVE (or) TRANSFER  (Division receiving asset must complete this section insure to complete Section A of this form	
Department	Division receiving asset must complete this section	
Department	Division receiving asset must complete this section numbers to complete Section A of this form	
Department	Division receiving asset must complete this section insure to complete Section A of this form  W Location: Dept./Div. No.	
Department E	/Division receiving asset must complete this section insure to complete Section A of this form  W Location:  New Dept/Div Signature:  D, SURPLUS, PILFERAGE, REPLACEMENT OR TRADE-IN	
Date: New Method: Donation, sol.	/Division receiving asset must complete this section insure to complete Section A of this form  W Location: Dept/Div. No:  New Dept/Div Signature:	
Date: New Method: Donation, sol.	Division receiving asset must complete this section Insure to complete Section A of this form  Dept/Div. No.  New Dept/Div Signature  D, SURPLUS, PILFERAGE, REPLACEMENT OR TRADE-IN Ensure to complete Section A of this form	
Department  En  Date: Ne  Method:  Donation Sale  Check One: Donation Sale	Division receiving asset must complete this section insure to complete Section A of this form  Dept./Div. No.  New Dept/Div Signature:  D, SURPLUS, PILFERAGE, REPLACEMENT OR TRADE-IN Ensure to complete Section A of this form  Surplus/Scrapped Pilferage Trade-In Rep	
Date: No. Method:	Division receiving asset must complete this section insure to complete Section A of this form  Dept./Div. No.  New Dept/Div Signature:  D, SURPLUS, PILFERAGE, REPLACEMENT OR TRADE-INTERSURE to complete Section A of this form  Surplus/Scrapped Pilferage Trade-In Rep	
Department  En  Date: Ne  Method:  C DONATION, SOL  Check One: Donation Sal  Date:  Dispositon Code:	Division receiving asset must complete this section insure to complete Section A of this form  Dept/Div. No:  New Dept/Div Signature:  D, SURPLUS, PILFERAGE, REPLACEMENT OR TRADE-IN Ensure to complete Section A of this form the Surplus/Scrapped Pilferage Trade-In Replacement for Trade-In Replacement received for Trade-In:  Amount received for Sale:  \$	lacement Asset
Date: Ne Method: Ne Method: Ne Method: Donation Sal Date: Donation Sal Date: P: Piliferage S: Sold, T: Tra	Division receiving asset must complete this section insure to complete Section A of this form  Dept/Div. No.  New Dept/Div Signature:  D, SURPLUS, PILFERAGE, REPLACEMENT OR TRADE-INGENSURE to complete Section A of this form  See Surplus/Scrapped Pilferage Trade-Ingensure to Complete Section A of this form  Amount received for Trade-Ingensure Section Sectio	Asset

\* Return original completed from to the Inventory Division within 10 days of receipt of the item(s) and/or transaction. If additional tags are required, Purchase Order, contact the in-

I acknowledge delivery by