

2924

PW Business Office

CITY OF BATON ROUGE - PARISH OF EAST BATON ROUGE
Movable Asset Disposition Form

Property Tag Number: 00110595 Equipment Number: 2924-0 Date: 4/11/17
Year: 2006 Make: Chevrolet Description: Silverado 15
VIN/Serial Number: 3BCEC14X16G256159 License No.: 184925 Color: Summit White
Odometer/Hour Meter: 66748 Department: Owning - 7902000 Using - 7901000

Type of Disposition:

- Pilferage (Must include Police Report)
- To Auction Lot
- Trade-In
- Donated (Must have Council approval)
- Scrapped

Condition of Equipment:

Paint: Battery: Engine: Differential:
Body: Brakes: Steering: Transmission:
Radio: Clutch: Upholstry: Air Conditioner:
Glass: Heater: Radiator: Tires: RF RR LF LR

List all missing engine parts and accessories: _____

I certify the above information to be accurate and this vehicle is free of trash/debris.

Authorized Departmental/Divisional Signature
[Signature]

Authorized Purchasing/Central Garage Signature

Date
1/8/18

Date

EBR PARISH PURCHASING

2018 JAN 29 PM 3:56

Fuel Card 2924-0 Cancelled On _____
Fuel Card _____ Cancelled On _____

[Signature]

CITY-PARISH GOVERNMENT

Movable Assets Acquisition, Departmental Move, Disposition and Correction Form

*As Needed Correct Section A, B, or C of the FMA Form:
Circle Your Corrections:*

A

Correction

Date: 4/11/17

Property Tag: 00110595

Description: 2006 Chevrolet Silverado 15

Serial No./VIN#: 3GCEC14X16G256159 Acct#:

Location: 1 1 1 Property Manager: _____ Class Code:
2 2 2 4 (digits) (code)

Dept./Div.#: CENTRAL GARAGE Date Rec'd: 5/4/06 P.O.#: 060568 P.O. Date: 4/4/06

Item Cost: \$11,814.00 **VEHICLE AND EQUIPMENT:** Make: Chevrolet Model: Silverado

Year: 2006 Equipment No.: 2924-D License No: 184325

B

DEPARTMENTAL MOVE (or) TRANSFER

Department/Division receiving asset must complete this section
Ensure to complete section A of this form

Date: _____ New Location: _____ Dept. /Div. No.: _____

Method: _____ New Dept./Div Signature: _____

C

DONATION, SOLD, SURPLUS, PILFERAGE, REPLACEMENT OR TRADE-IN

Ensure to complete section A of this form

Check One: Donation Sale Surplus/Scrapped Pilferage Trade-In Replacement Asset

Date: _____ Amount received Trade-In \$ _____

Disposition Code: _____ Amount received for Sale: \$ _____

Sold To: _____ Donee (Organization): _____

P: Pilferage, S: Sold, I: Trade-in, Y: Donated, Z: Scrapped/Surplus, ZX Replacement Asset

Authorized Signature: [Signature] Date: 1/17/17

*Return original completed form to the Inventory Division within 10 days of receipt of the item(s) and/or transaction. *If additional tags are required for P.O., call at 389-4965. **