

RESOLUTIONS:

1.) Fund: Municipal Service Amount: \$ 1,595.00

Explanation: Budget Amendment in the Municipal Service Fund for donations received by Nassau County Animal Services.

Support: Tab 1 Page A

OTHER ITEMS FOR CONSIDERATION:

1.) Approve attached Deletion From Inventory Forms

Support: Tab 2 Page A

Tab 1
Page A

RESOLUTION 2020-

WHEREAS the Municipal Service Fund has received donations for Nassau County Animal Services.

WHEREAS this revenue was not anticipated in the 2020/2021 budget year by the fund.

BE IT THEREFORE resolved by the Board of County Commissioners, Nassau County, Florida in regular session, duly assembled on the _____ day of _____, 2020 the following budget amendment pursuant to Florida Statutes Chapter 129.06 be adopted:

REVENUE		
04621562-366910	Donations	\$1,595
APPROPRIATION		
04621562-531032	Veterinarian Services	\$1,595

ADOPTED this _____ day of _____, 2020.

ATTEST:

CHAIR

EX-OFFICIO CLERK

11/20/21

NASSAU COUNTY BOARD OF COUNTY COMMISSIONERS
PAYOR: ANIMAL CONTROL DEPARTMENT
Deposited: Checks - Fifth Third Bank

Bill2Pay

10.07.2020

PAYOR #	REVENUE TYPE	REV CODE	ACCOUNT NUMBER	AMOUNT	FINANCE USE RECEIPT #
53	Adoption Fee (Dog/Cat)	ACST	04621562-346420		
53	Micro Chip Fee	ACMICF	04621562-346412		
53	County License Tags	COTAG	04621562-346440		
53	Spay Nassau	ACSPAY	04000000-201000-SPAYN		
53	Fees/Reclaim	ACF	04621562-346410		
53	Services Rendered (Owner Surrender/Euth)	ACSVCS	04621562-346430		
53	Donations	DONAC	04621562-366910	100.00	531032
53	Permits - Animal Control & Licenses	ACPERM	04621562-322014		
53	Horse Trailer Permits	HRSTRL	04621562-329620		
53	Fine	ACFine	04621562-354001		
53	Misc Revenue	MRAC	04621562-369900		
53	Interlocal Fees-Hilliard	ACILH	04621562-337611		
53	Interlocal Fees-Callahan	ACILC	04621562-337612		
TOTAL:				\$ 100.00	

Admin. Assistant: *Penny Bunnese*
 Director: *Fred Meyer*
 Finance Dept: _____
 Date: _____

Bill2Pay Electronically Deposited \$100.00 10.13.2020

RCVD ONE
20 OCT 15 AM 9:5

Nassau County Board of County Commissioners
 Nassau County Animal Services

DATE	RECEIPT 35547076	NAME Serica	CK/Cash	RECEIPT AMOUNT	ADOPTION FEES (ACST)	MICRO CHIP FEES (ACMICF)	OWNER & EUTHANASIA SURRENDER FEES (ACS/CS)	COUNTY TAGS (ALTERED & UNALTERED) (COTAG)	*Spay Nassau* (ACSPAY)	RTO IMPOUND FINES (ACF)	Permits (ACPERM)	Horse Trl (HRSTRL)	DONATION (DONAC)	MISC REVENU E (MIRAC)
10.07.2020			Cash	100.00									100.00	
				100.00				0.00						

FIFTH THIRD BANCORP
EDI SERVICES
REMITTANCE/PAYMENT ADVICE

OCTOBER 13, 2020

NASSAU COUNTY BOARD OF CO
N/A

PAYMENT INFORMATION:

CREDIT: \$85,994.87
EFFECTIVE DATE: 10/09/2020
INPUT FORMAT: ACHCCD

CREDIT PARTY

ROUTING ID: 063113057
DEMAND ACCT: 7450381996

DEBIT PARTY

ROUTING ID: 020287007
ACCT:
COMPANY ID: BILL2PAYNB

TRACE NUMBER: 020287006265206

RECEIVER: Bill2Pay 100720
ZZ: Bill2Pay 100720

ORIGINATOR: BILL2PAY

BUILDING DEPT \$85,872.06
HUMAN RESOURCES \$22.81
ANIMAL CTRL \$100.00

Search - Find a Transaction

From: 10/7/2020	To: 10/7/2020	Total Amount:	Payment Amount:	Payment Type: All
Confirmation #:	First Name:	Last Name:	Account Number:	Source: All
CC First 6:	CC Last 4:	eCheck Last 4:	Product Type: Animal Services	Notes: <input type="checkbox"/>
			<input type="button" value="Search"/> <input type="button" value="Clear"/>	

	Confirmation Number	Transaction Date	Product	Account Number	First Name	Last Name	Payment Amount	Status
Edit	35547076	10/7/2020 6:34:27 PM	Animal Services	Isabelle kitty	Kathy	Serca	100.00	Approved-CC
								Count: 1



Payment Receipt

Confirmation Number: 35547076
Payment For: Nassau Co Board of Co Commissioners
Office:
Status: Approved
Transaction Date: 10/7/2020 6:34:27 PM EST
Payment Type: MasterCard - *****5445 - Credit
Product Detail: Animal Services - Isabelle kitty - \$100.00
Convenience Fee: \$2.50
Total Payment Amount: \$102.50
Name: Kathy Serca
Phone:
Notes: *Vet Ser acct*

Close

F120121
 NASSAU COUNTY BOARD OF COUNTY COMMISSIONERS
 PAYOR: ANIMAL CONTROL DEPARTMENT
 Deposited: Checks - Fifth Third Bank

Bill2Pay

10.06.2020

PAYOR	REVENUE TYPE	REV CODE	ACCOUNT NUMBER	AMOUNT	FINANCE USE RECEIPT #
53	Adoption Fee (Dog/Cat)	ACST	04621562-346420		
53	Micro Chip Fee	ACMICF	04621562-346412	19.00	
53	County License Tags	COTAG	04621562-346440		
53	Spay Nassau	ACSPAY	04000000-201000-SPAYN		
53	Fees/Reclaim	ACF	04621562-346410		
53	Services Rendered (Owner Surrender/Euth)	ACSVCS	04621562-346430	50.00	
53	Donations	DONAC	04621562-366910	275.00	531032
53	Permits - Animal Control & Licenses	ACPERM	04621562-322014		
53	Horse Trailer Permits	HRSTRL	04621562-329620		
53	Fine	ACFine	04621562-354001		
53	Misc Revenue	MRAC	04621562-369900	20.00	
53	Interlocal Fees-Hilliard	ACILH	04621562-337611		
53	Interlocal Fees-Callahan	ACILC	04621562-337612		
TOTAL:				\$ 364.00	

Admin. Assistant: *Penny Burrows*
 Director: *Justin M. ...*
 Finance Dept: _____
 Date: _____

Bill2Pay Electronically Deposited \$364.00 10.09.2020

2020 OCT 10 10:17 AM
 10017440

Nassau County Board of County Commissioners
 Nassau County Animal Services

10.06.2020

DATE	RECEIPT	NAME	Ck/Cash	RECEIPT AMOUNT	ADOPTION FEES (ACST)	MICRO CHIP FEES (ACMICF)	OWNER & EUTHANASIA SURRENDER FEES (ACSVGS)	COUNTY TAGS (ALTERED & UNALTERED) (COTAG)	*Spay Nassau (ACSPAY)	RTO IMPOUND FINES (ACF)	Permits (ACPERM)	Horse Trl (HRSTRL)	DONATION (DONAC)	MISC REVENUE (MRAC)
10.06.2020	35492796	Loudermilk	Card	25.00									25.00	
10.06.2020	35494878	Carmel	Card	25.00									25.00	
10.06.2020	35500393	Laroche	Card	40.00									40.00	
10.06.2020	35502030	Dixon	Declined											
10.06.2020	35502064	Dixon	Declined											
10.06.2020	35502323	Dixon	Declined											20.00
10.06.2020	35502492	Dixon	Card	39.00		19.00								
10.06.2020	35508278	Manning	Card	50.00			50.00						20.00	
10.06.2020	35517741	Haas	Card	20.00									40.00	
10.06.2020	35518567	Palmer	Card	40.00										
10.06.2020	35519176	Charge	Declined										25.00	
10.06.2020	35519203	Charge	Card	25.00									100.00	
10.06.2020	35519336	Charge	Card	100.00										
				364.00	-	19.00	50.00	0.00	-	-	-	-	275.00	20.00

PAYMENT INFORMATION:

CREDIT: \$13,736.88
EFFECTIVE DATE: 10/08/2020
INPUT FORMAT: ACHCCD

CREDIT PARTY

ROUTING ID: 063113057
DEMAND ACCT: 7450381996

DEBIT PARTY

ROUTING ID: 020283001
ACCT:
COMPANY ID: BILL2PAYNB

TRACE NUMBER: 020283008447132

RECEIVER: Bill12Pay 100620
ZZ: Bill12Pay 100620

ORIGINATOR: BILL2PAY

BUILDING DEPT \$13,675.77-420.12=\$13,255.65
ANIMAL CTRL \$364.00
HUMAN RESOURCES \$117.23

Search - Find a Transaction

From: 10/6/2020 To: 10/6/2020 Total Amount: Payment Amount: Payment Type: All
 Confirmation #: First Name: Last Name: Account Number: Source: All
 CC First 6: CC: eCheck: Product Type: Animal Services Notes:

	Confirmation Number	Transaction Date	Product	Account Number	First Name	Last Name	Payment Amount	Status
Edit	35492796	10/6/2020 6:50:28 AM	Animal Services	Isobella	Christina	Loudermilk	25.00	Approved-ECH
Edit	35494878	10/6/2020 8:41:26 AM	Animal Services	Isobella	Joan	Carmel	25.00	Approved-CC
Edit	35500393	10/6/2020 11:22:55 AM	Animal Services	Donation for little kitty's paw	Jill	LAROCHE	40.00	Approved-CC
Edit	35502030	10/6/2020 11:53:49 AM	Animal Services	RTO OFF PIKA	AMELIA	ANDERSON DIXON	64.00	Declined-CC
Edit	35502064	10/6/2020 11:54:56 AM	Animal Services	RTO OF PIKA	AMELIA	ANDERSON DIXON	64.00	Declined-CC
Edit	35502323	10/6/2020 12:00:55 PM	Animal Services	RTO OF PIKA	AMELIA	ANDERSON DIXON	64.00	Declined-CC
Edit	35502492	10/6/2020 12:04:52 PM	Animal Services	RTO OF PIKA	AMELIA	ANDERSON DIXON	39.00	Approved-CC
Edit	35508278	10/6/2020 1:55:56 PM	Animal Services	owner surrender of wolf	JOANN	H MANNING	50.00	Approved-CC
Edit	35517741	10/6/2020 6:30:15 PM	Animal Services	Isobella	Jennifer	Jane Haas	20.00	Approved-CC
Edit	35518567	10/6/2020 7:20:47 PM	Animal Services	Donation for Isobella	Stephanie	Palmer	40.00	Approved-CC
Edit	35519176	10/6/2020 7:57:32 PM	Animal Services	Isobella	Shelly	Charge	25.00	Declined-CC
Edit	35519203	10/6/2020 7:59:16 PM	Animal Services	Isobella	Shelly	Charge	25.00	Approved-CC
Edit	35519336	10/6/2020 8:06:37 PM	Animal Services	Toby’s vet bill	Shelly	Charge	100.00	Approved-CC
								Count : 13



Payment Receipt

Confirmation Number: 35492796
Payment For: Nassau Co Board of Co Commissioners
Office:
Status: Approved
Transaction Date: 10/6/2020 6:50:28 AM EST
Payment Type: Bank Account - *****6703
Product Detail: Animal Services - Isobella - \$25.00
Convenience Fee: \$2.50
Total Payment Amount: \$27.50
Name: Christina Loudermilk
Phone:
Notes: *Vet Ser acct*

Close

Payment Receipt

Confirmation Number: 35494878
Payment For: Nassau Co Board of Co Commissioners
Office:
Status: Approved
Transaction Date: 10/6/2020 8:41:26 AM EST
Payment Type: Visa - *****5129 - Credit
Product Detail: Animal Services - Isobella - \$25.00
Convenience Fee: \$2.50
Total Payment Amount: \$27.50
Name: Joan Carmel
Phone:
Notes: *Vet Ser acct*

Close

Payment Receipt

Confirmation Number:

35500393

Payment For:

Nassau Co Board of Co Commissioners

Office:

Status:

Approved

Transaction Date:

10/6/2020 11:22:55 AM EST

Payment Type:

Visa - *****5645 - Credit

Product Detail:

Animal Services - Donation for little kitty's paw - \$40.00

Convenience Fee:

\$2.50

Total Payment Amount:

\$42.50

Name:

Jill LAROCHE

Phone:

Notes: *Vet Ser acct*

Close

Payment Receipt

Confirmation Number:

35517741

Payment For:

Nassau Co Board of Co Commissioners

Office:

Status:

Approved

Transaction Date:

10/6/2020 6:30:15 PM EST

Payment Type:

Visa - *****0493 - Credit

Product Detail:

Animal Services - Isobella - \$20.00

Convenience Fee:

\$2.50

Total Payment Amount:

\$22.50

Name:

Jennifer Jane Haas

Phone:

Notes: *Vet Ser Accep*

Close

Payment Receipt

Confirmation Number:

35518567

Payment For:

Nassau Co Board of Co Commissioners

Office:

Status:

Approved

Transaction Date:

10/6/2020 7:20:47 PM EST

Payment Type:

Visa - *****8349 - Credit

Product Detail:

Animal Services - Donation for Isobella - \$40.00

Convenience Fee:

\$2.50

Total Payment Amount:

\$42.50

Name:

Stephanie Palmer

Phone:

Notes: *Vet Ser acct*

Close

Payment Receipt

Confirmation Number: 35519203
Payment For: Nassau Co Board of Co Commissioners
Office:
Status: Approved
Transaction Date: 10/6/2020 7:59:16 PM EST
Payment Type: Visa - *****9775 - Credit
Product Detail: Animal Services - Isobella - \$25.00
Convenience Fee: \$2.50
Total Payment Amount: \$27.50
Name: Shelly Charge
Phone:
Notes: *Vet Ser acc*

Close

Payment Receipt

Confirmation Number:

35519336

Payment For:

Nassau Co Board of Co Commissioners

Office:

Status:

Approved

Transaction Date:

10/6/2020 8:06:37 PM EST

Payment Type:

Visa - *****9775 - Credit

Product Detail:

Animal Services - Toby's vet bill - \$100.00

Convenience Fee:

\$2.50

Total Payment Amount:

\$102.50

Name:

Shelly Charge

Phone:

Notes: *Vet Ser Acct*

Close

11/20/21

NASSAU COUNTY BOARD OF COUNTY COMMISSIONERS
PAYOR: ANIMAL CONTROL DEPARTMENT
Deposited: Checks - Fifth Third Bank

Bill2Pay

10.05.2020

PAYOR #	REVENUE TYPE	REV CODE	ACCOUNT NUMBER	AMOUNT	FINANCE USE RECEIPT #
53	Adoption Fee (Dog/Cat)	ACST	04621562-346420		
53	Micro Chip Fee	ACMICF	04621562-346412		
53	County License Tags	COTAG	04621562-346440		
53	Spay Nassau	ACSPAY	04000000-201000-SPAYN		
53	Fees/Reclaim	ACF	04621562-346410		
53	Services Rendered (Owner Surrender/Euth)	ACSVCS	04621562-346430		
53	Donations	DONAC	04621562-366910	45.00	531032
53	Permits - Animal Control & Licenses	ACPERM	04621562-322014		
53	Horse Trailer Permits	HRSTRL	04621562-329620		
53	Fine	ACFine	04621562-354001		
53	Misc Revenue	MRAC	04621562-369900		
53	Interlocal Fees-Hilliard	ACILH	04621562-337611		
53	Interlocal Fees-Callahan	ACILC	04621562-337612		
TOTAL:				\$ 45.00	

Admin. Assistant: *Penny Bursey*
 Director: *[Signature]*
 Finance Dept: _____
 Date: _____

Bill2Pay Electronically Deposited \$45.00 10.08.2020

RCV'D BNS
120 OCT 15 09:18

Nassau County Board of County Commissioners
 Nassau County Animal Services

10.05.2020

DATE	RECEIPT	NAME	Ck/Cash	RECEIPT AMOUNT	ADOPTION FEES (ACST)	MICRO CHIP FEES (ACMICF)	OWNER & EUTHANASIA SURRENDER FEES (ACSVCS)	COUNTY TAGS (ALTERED & UNALTERED) (COTAG)	*Spay Nassau* (ACSPAY)	RTO IMPOUND FINES (ACF)	Permits (ACPERM)	Horse Trl (HRSTRL)	DONATION (DONAC)	MISC REVENUE (MRAC)
10.05.2020	35452550	Grunewald	Card	25.00									25.00	
10.05.2020	35474821	Starling	Card	20.00									20.00	
				45.00	-	-	-	0.00	-	-	-	-	45.00	-

PAYMENT INFORMATION:

CREDIT: \$4,314.99
EFFECTIVE DATE: 10/07/2020
INPUT FORMAT: ACHCCD

CREDIT PARTY

ROUTING ID: 063113057
DEMAND ACCT: 7450381996

DEBIT PARTY

ROUTING ID: 020282002
ACCT:
COMPANY ID: BILL2PAYNB

TRACE NUMBER: 020282002323189

RECEIVER: Bill2Pay 100520
ZZ: Bill2Pay 100520

ORIGINATOR: BILL2PAY

BUILDING DEPT	\$3206.92
HUMAN RESOURCES	\$87.35
RESCUE BILLING	\$975.72
ANIMAL CTRL	\$45.00

Search - Find a Transaction

From: 10/5/2020 To: 10/5/2020
 Total Amount:
 Payment Amount:
 Payment Type: All

Confirmation #:
 First Name:
 Last Name:
 Account Number:
 Source: All

CC First 6:
 Last 4:
 eCheck Last 4:
 Product: Animal Services

Notes:

	Confirmation Number	Transaction Date	Product	Account Number	First Name	Last Name	Payment Amount	Status
Edit	35452550	10/5/2020 4:57:29 AM	Animal Services	Isobella	Donna	Grunewald	25.00	Approved-CC
Edit	35474821	10/5/2020 2:16:04 PM	Animal Services	ISOBELLA	Braxton	starling	20.00	Approved-CC
								Count : 2



Payment Receipt

Confirmation Number:

35452550

Payment For:

Nassau Co Board of Co Commissioners

Office:

Status:

Approved

Transaction Date:

10/5/2020 4:57:29 AM EST

Payment Type:

MasterCard - *****1856 - Credit

Product Detail:

Animal Services - Isobella - \$25.00

Convenience Fee:

\$2.50

Total Payment Amount:

\$27.50

Name:

Donna Grunewald

Phone:

Notes: *Vet Ser acct* //

Close

Payment Receipt

Confirmation Number: 35474821
Payment For: Nassau Co Board of Co Commissioners
Office:
Status: Approved
Transaction Date: 10/5/2020 2:16:04 PM EST
Payment Type: Visa - *****1687 - Credit
Product Detail: Animal Services - ISOBELLA - \$20.00
Convenience Fee: \$2.50
Total Payment Amount: \$22.50
Name: Braxton starling
Phone:
Notes: Vet Ser accep

Close

Fy2021

NASSAU COUNTY BOARD OF COUNTY COMMISSIONERS
PAYOR: ANIMAL CONTROL DEPARTMENT
Deposited: Checks - Fifth Third Bank

Bill2Pay

10.04.2020

PAYOR #	REVENUE TYPE	REV CODE	ACCOUNT NUMBER	AMOUNT	FINANCE USE RECEIPT #
53	Adoption Fee (Dog/Cat)	ACST	04621562-346420		
53	Micro Chip Fee	ACMICF	04621562-346412		
53	County License Tags	COTAG	04621562-346440		
53	Spay Nassau	ACSPAY	04000000-201000-SPAYN		
53	Fees/Reclaim	ACF	04621562-346410		
53	Services Rendered (Owner Surrender/Euth)	ACSVCS	04621562-346430		
53	Donations	DONAC	04621562-366910	774.99	531032
53	Permits - Animal Control & Licenses	ACPERM	04621562-322014		
53	Horse Trailer Permits	HRSTRL	04621562-329620		
53	Fine	ACFine	04621562-354001		
53	Misc Revenue	MRAC	04621562-369900		
53	Interlocal Fees-Hilliard	ACILH	04621562-337611		
53	Interlocal Fees-Callahan	ACILC	04621562-337612		
TOTAL:				\$ 774.99	

Admin. Assistant: *[Signature]*
 Director: *[Signature]*
 Finance Dept: _____
 Date: _____

Bill2Pay Electronically Deposited \$774.99 10.08.2020

PAID ONE
20 OCT 15 AM '20

Nassau County Board of County Commissioners
 Nassau County Animal Services

10.04.2020

DATE	RECEIPT	NAME	Ck/Cash	RECEIPT AMOUNT	ADOPTION FEES (ACST)	MICRO CHIP FEES (ACMIF)	OWNER & EUTHANASIA SURRENDER FEES (ACSVGS)	COUNTY TAGS (ALTERED & UNALTERED) (COTAG)	*Spay Nassau* (ACSPAY)	RTO IMPOUND FINES (ACF)	Permits (ACPERM)	Horse Trl (HRSTRL)	DONATION (DONAC)	MISC REVENUE (MRAC)
10.04.2020	35432686	Murrell	Card	20.00									20.00	
10.04.2020	35432862	Kavey	Card	50.00									50.00	
10.04.2020	35434772	DeHaven	Card	25.00									25.00	
10.04.2020	35435357	Weathers	Card	250.00									250.00	
10.04.2020	35436082	Kingery	Card	389.99									389.99	
10.04.2020	35442684	Watson	Card	10.00									10.00	
10.04.2020	35443148	Ruiz	Card	30.00									30.00	
				774.99	-	-	-	0.00	-	-	-	-	774.99	-

=====

PAYMENT INFORMATION:

CREDIT: \$930.99
EFFECTIVE DATE: 10/07/2020
INPUT FORMAT: ACHCCD

CREDIT PARTY

ROUTING ID: 063113057
DEMAND ACCT: 7450381996

DEBIT PARTY

ROUTING ID: 020282002
ACCT:
COMPANY ID: BILL2PAYNB

TRACE NUMBER: 020282002323188

RECEIVER: Bill12Pay 100420
ZZ: Bill12Pay 100420

ORIGINATOR: .BILL2PAY

ANIMAL CTRL \$774.99
HUMAN RESOURCES \$156.00

Search - Find a Transaction

From: 10/4/2020	To: 10/4/2020	Total Amount:	Payment Amount:	Payment Type: All
Confirmation #:	First Name:	Last Name:	Account Number:	Source: All
CC First 6:	CC Last 4:	eCheck Last 4:	Product Type: Animal Services	Notes: <input type="checkbox"/>

	Confirmation Number	Transaction Date	Product	Account Number	First Name	Last Name	Payment Amount	Status
Edit	35432686	10/4/2020 3:03:43 AM	Animal Services	Isobella	Sally	J Murrell	20.00	Approved-CC
Edit	35432862	10/4/2020 6:29:44 AM	Animal Services	Isobella	Allison	Kavey	50.00	Approved-CC
Edit	35434772	10/4/2020 9:44:30 AM	Animal Services	Isobella’s surgery.	Julie	A DeHaven	25.00	Approved-CC
Edit	35435357	10/4/2020 10:32:09 AM	Animal Services	Isobella	Beverly	Weathers	250.00	Approved-CC
Edit	35436082	10/4/2020 11:31:49 AM	Animal Services	Isobella	Rebecca	Kingery	389.99	Approved-CC
Edit	35442684	10/4/2020 7:23:02 PM	Animal Services	Donate Isobella	Debra	A Watson	10.00	Approved-CC
Edit	35443148	10/4/2020 7:59:15 PM	Animal Services	Isobella	Jessica	Rulz	30.00	Approved-CC
								Count : 7



Payment Receipt

Confirmation Number: 35432686
Payment For: Nassau Co Board of Co Commissioners
Office:
Status: Approved
Transaction Date: 10/4/2020 3:03:43 AM EST
Payment Type: MasterCard - *****8232 - Credit
Product Detail: Animal Services - Isobella - \$20.00
Convenience Fee: \$2.50
Total Payment Amount: \$22.50
Name: Sally J Murrell
Phone:
Notes: Vet Ser acct //

Close

Payment Receipt

Confirmation Number: 35432862
Payment For: Nassau Co Board of Co Commissioners
Office:
Status: Approved
Transaction Date: 10/4/2020 6:29:44 AM EST
Payment Type: Visa - *****9618 - Credit
Product Detail: Animal Services - Isobella - \$50.00
Convenience Fee: \$2.50
Total Payment Amount: \$52.50
Name: Allison Kavey
Phone:
Notes: *Vel Ser Acct* //

Close

Payment Receipt

Confirmation Number: 35434772
Payment For: Nassau Co Board of Co Commissioners
Office:
Status: Approved
Transaction Date: 10/4/2020 9:44:30 AM EST
Payment Type: Visa - *****5946 - Credit
Product Detail: Animal Services - Isobella's surgery. - \$25.00
Convenience Fee: \$2.50
Total Payment Amount: \$27.50
Name: Julie A DeHaven
Phone:
Notes: Vet Ser ocep

Close

Payment Receipt

Confirmation Number: 35435357
Payment For: Nassau Co Board of Co Commissioners
Office:
Status: Approved
Transaction Date: 10/4/2020 10:32:09 AM EST
Payment Type: MasterCard - *****8001 - Credit
Product Detail: Animal Services - Isobella - \$250.00
Convenience Fee: \$7.50
Total Payment Amount: \$257.50
Name: Beverly Weathers
Phone:
Notes: *Vet Ser acct*

Close

Payment Receipt

Confirmation Number:

35436082

Payment For:

Nassau Co Board of Co Commissioners

Office:

Status:

Approved

Transaction Date:

10/4/2020 11:31:49 AM EST

Payment Type:

American Express - *****1006 - Credit

Product Detail:

Animal Services - Isobella - \$389.99

Convenience Fee:

\$10.00

Total Payment Amount:

\$399.99

Name:

Rebecca Kingery

Phone:

Notes: *Vet Ser acct.*

Close

Payment Receipt

Confirmation Number: 35442684
Payment For: Nassau Co Board of Co Commissioners
Office:
Status: Approved
Transaction Date: 10/4/2020 7:23:02 PM EST
Payment Type: Visa - *****0610 - Credit
Product Detail: Animal Services - Donate Isobella - \$10.00
Convenience Fee: \$2.50
Total Payment Amount: \$12.50
Name: Debra A Watson
Phone:
Notes: *Vet Ser Acct*

Close

Payment Receipt

Confirmation Number: 35443148
Payment For: Nassau Co Board of Co Commissioners
Office:
Status: Approved
Transaction Date: 10/4/2020 7:59:15 PM EST
Payment Type: MasterCard - *****0320 - Credit
Product Detail: Animal Services - Isobella - \$30.00
Convenience Fee: \$2.50
Total Payment Amount: \$32.50
Name: Jessica Ruiz
Phone:
Notes: Vet Ser acct

Close

10/20/21

NASSAU COUNTY BOARD OF COUNTY COMMISSIONERS
PAYOR: ANIMAL CONTROL DEPARTMENT
Deposited: Checks - Fifth Third Bank

Bill2Pay

10.03.2020

PAYOR	REVENUE TYPE	REV CODE	ACCOUNT NUMBER	AMOUNT	FINANCE USE RECEIPT #
53	Adoption Fee (Dog/Cat)	ACST	04621562-346420	10.00	
53	Micro Chip Fee	ACMICF	04621562-346412		
53	County License Tags	COTAG	04621562-346440		
53	Spay Nassau	ACSPAY	04000000-201000-SPAYN		
53	Fees/Reclaim	ACF	04621562-346410		
53	Services Rendered (Owner Surrender/Euth)	ACSVCS	04621562-346430		
53	Donations	DONAC	04621562-366910	400.00	531032
53	Permits - Animal Control & Licenses	ACPERM	04621562-322014		
53	Horse Trailer Permits	HRSTRL	04621562-329620		
53	Fine	ACFine	04621562-354001		
53	Misc Revenue	MRAC	04621562-369900		
53	Interlocal Fees-Hilliard	ACILH	04621562-337611		
53	Interlocal Fees-Callahan	ACILC	04621562-337612		
TOTAL:				\$ 410.00	

Admin. Assistant: *Benny Burnse*
 Director: *[Signature]*
 Finance Dept: _____
 Date: _____

Bill2Pay Electronically Deposited \$410.00 10.08.2020

2020 OCT 15 11:11

Nassau County Board of County Commissioners
 Nassau County Animal Services

10.03.2020

DATE	RECEIPT	NAME	CK/Cash	RECEIPT AMOUNT	ADOPTION FEES (ACST)	MICRO CHIP FEES (ACMICF)	OWNER & EUTHANASIA SURRENDER FEES (ACSVCS)	COUNTY TAGS (ALTERED & UNALTERED) (COTAG)	*Spay Nassau* (ACSPAY)	RTO IMPOUND FINES (ACF)	Permits (ACPERM)	Horse Trl (HRSTRL)	DONATION (DONAC)	MISC REVENUE (MRAC)
10.03.2020	35426482	Miller	Card	10.00	10.00								50.00	
10.03.2020	35430895	Brant	Card	50.00									15.00	
10.03.2020	35430906	Rocca	Card	15.00										
10.03.2020	35430917	Lindsay	Card	Declinded									100.00	
10.03.2020	35430928	Ross	Card	100.00									50.00	
10.03.2020	35430938	Lindsay	Card	50.00									50.00	
10.03.2020	35430998	DeLapp	Card	50.00									100.00	
10.03.2020	35431583	Fortier	Card	100.00									10.00	
10.03.2020	35431789	Gonzalez	Card	10.00									25.00	
10.03.2020	35431809	Wise	Card	25.00										
				410.00	10.00	-	-	0.00	-	-	-	-	400.00	-

FIFTH THIRD BANCORP
EDI SERVICES
REMITTANCE/PAYMENT ADVICE

OCTOBER 8, 2020

NASSAU COUNTY BOARD OF CO
N/A

=====

PAYMENT INFORMATION:

CREDIT: \$447.49
EFFECTIVE DATE: 10/07/2020
INPUT FORMAT: ACHCCD

CREDIT PARTY

ROUTING ID: 063113057
DEMAND ACCT: 7450381996

DEBIT PARTY

ROUTING ID: 020282002
ACCT:
COMPANY ID: BILL2PAYNB

TRACE NUMBER: 020282002323187

RECEIVER: Bill12Pay 100320
ZZ: Bill12Pay 100320

ORIGINATOR: BILL2PAY

ANIMAL CTRL \$410.00
HUMAN RESOURCES \$37.49

Search - Find a Transaction

From: 10/3/2020 To: 10/3/2020 Total Amount: Payment Amount: Payment Type: All
 Confirmation #: First Name: Last Name: Account Number: Source: All
 CC First 6: Last 4: eCheck Last 4: Product Type: Animal Services Notes:

	Confirmation Number	Transaction Date	Product	Account Number	First Name	Last Name	Payment Amount	Status
Edit	35426482	10/3/2020 1:13:03 PM	Animal Services	ADOPTION OF PASTRAMI	KERRIGAN	RENEE MILLER	10.00	Approved-CC
Edit	35430895	10/3/2020 8:02:43 PM	Animal Services	Isobella	Robert	Brant	50.00	Approved-CC
Edit	35430906	10/3/2020 8:03:33 PM	Animal Services	Isabella	Tiffany	Rocca	15.00	Approved-CC
Edit	35430917	10/3/2020 8:04:28 PM	Animal Services	Isobell	Tonya	Lindsay	50.00	Declined-CC
Edit	35430928	10/3/2020 8:05:42 PM	Animal Services	Isobella	Ashten	Ross	100.00	Approved-CC
Edit	35430938	10/3/2020 8:06:29 PM	Animal Services	Isobell	Tonya	Lindsay	50.00	Approved-CC
Edit	35430998	10/3/2020 8:15:25 PM	Animal Services	Isobella	Jacqueline	DeLapp	50.00	Approved-CC
Edit	35431583	10/3/2020 9:37:17 PM	Animal Services	Isobella	Megan	fortier	100.00	Approved-CC
Edit	35431789	10/3/2020 10:05:27 PM	Animal Services	Isobella	Max	Gonzalez	10.00	Approved-CC
Edit	35431806	10/3/2020 10:09:24 PM	Animal Services	Isobella	Ashley	Wise	25.00	Approved-CC
								Count: 10

Payment Receipt

Confirmation Number: 35430895
Payment For: Nassau Co Board of Co Commissioners
Office:
Status: Approved
Transaction Date: 10/3/2020 8:02:43 PM EST
Payment Type: Visa - *****4795 - Credit
Product Detail: Animal Services - Isobella - \$50.00
Convenience Fee: \$2.50
Total Payment Amount: \$52.50
Name: Robert Brant
Phone:
Notes: *Vet Ser Recp* //

Close

Payment Receipt

Confirmation Number: 35430906
Payment For: Nassau Co Board of Co Commissioners
Office:
Status: Approved
Transaction Date: 10/3/2020 8:03:33 PM EST
Payment Type: Visa - *****2988 - Credit
Product Detail: Animal Services - Isabella - \$15.00
Convenience Fee: \$2.50
Total Payment Amount: \$17.50
Name: Tiffany Rocca
Phone:
Notes: Vet Ser acct

Close

Payment Receipt

Confirmation Number:

35430928

Payment For:

Nassau Co Board of Co Commissioners

Office:

Status:

Approved

Transaction Date:

10/3/2020 8:05:42 PM EST

Payment Type:

Visa - *****1608 - Credit

Product Detail:

Animal Services - Isobella - \$100.00

Convenience Fee:

\$2.50

Total Payment Amount:

\$102.50

Name:

Ashten Ross

Phone:

Notes: *Vet Ser Recp*

Close

Payment Receipt

Confirmation Number: 35430938
Payment For: Nassau Co Board of Co Commissioners
Office:
Status: Approved
Transaction Date: 10/3/2020 8:06:29 PM EST
Payment Type: Visa - *****4510 - Credit
Product Detail: Animal Services - Isobell - \$50.00
Convenience Fee: \$2.50
Total Payment Amount: \$52.50
Name: Tonya Lindsay
Phone:
Notes: *Vet Ser Acct*

Close

Payment Receipt

Confirmation Number: 35430998
Payment For: Nassau Co Board of Co Commissioners
Office:
Status: Approved
Transaction Date: 10/3/2020 8:15:25 PM EST
Payment Type: Visa - *****7025 - Credit
Product Detail: Animal Services - Isobella - \$50.00
Convenience Fee: \$2.50
Total Payment Amount: \$52.50
Name: Jacqueline DeLapp
Phone:
Notes: Vet Ser acct

Close

Payment Receipt

Confirmation Number: 35431583
Payment For: Nassau Co Board of Co Commissioners
Office:
Status: Approved
Transaction Date: 10/3/2020 9:37:17 PM EST
Payment Type: Visa - *****5975 - Credit
Product Detail: Animal Services - Isobella - \$100.00
Convenience Fee: \$2.50
Total Payment Amount: \$102.50
Name: Megan fortier
Phone:
Notes: *Vet Ser Acct*

Close

Payment Receipt

Confirmation Number: 35431789
Payment For: Nassau Co Board of Co Commissioners
Office:
Status: Approved
Transaction Date: 10/3/2020 10:05:27 PM EST
Payment Type: Visa - *****4741 - Credit
Product Detail: Animal Services - Isobella - \$10.00
Convenience Fee: \$2.50
Total Payment Amount: \$12.50
Name: Max Gonzalez
Phone:
Notes: Vet Ser Acct

Close

Payment Receipt

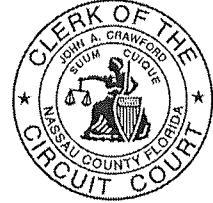
Confirmation Number: 35431806
Payment For: Nassau Co Board of Co Commissioners
Office:
Status: Approved
Transaction Date: 10/3/2020 10:09:24 PM EST
Payment Type: Visa - *****0735 - Credit
Product Detail: Animal Services - Isobella - \$25.00
Convenience Fee: \$2.50
Total Payment Amount: \$27.50
Name: Ashley Wise
Phone:
Notes: *Vet Ser acct*

Close

Tab 2
Page A



JOHN A. CRAWFORD
Clerk of the Circuit Court and Comptroller
 Ex-Officio Clerk to the Board of County Commissioners
 Auditor, Recorder and Custodian of All County Funds
 Nassau County



MEMORANDUM

To: Megan Sawyer, OMB

From: Kari Ulmer, Clerk Financial Services

Date: 10/2/20

Re: Deletion of Inventory

Please present the below Deletion from Inventory request(s) to the Board for approval:
 The original forms are attached.

DI #	Asset #	Tag #	Department
20.185	20080280	6127	Tax Collector
20.186	20080281	6128	Tax Collector
20.187	20090116	6243	Tax Collector
20.188	20090296	6379	Tax Collector
20.189	20101189	6542	Tax Collector
20.190	20101190	6543	Tax Collector
20.191	20101209	6562	Tax Collector
20.192	20170069	9118	Tax Collector
20.193	20120019	6819	Tax Collector
20.194	20101250	6603	Tax Collector
20.195	20150083	8392	Tax Collector
20.196	20150074	8383	Tax Collector
20.197	20150855	8648	Tax Collector
20.198	20190213	9909	Fire Rescue

10/2/20
 10:00 AM

DELETION FROM INVENTORY FORM

DI # 2020-185

DEPARTMENT: Tax Collector

TO BE COMPLETED BY DEPARTMENT:

Property Number: 06127 Mileage / Hours if applicable:

Year/Description: AXIS 215 NETWORK CAMERA

Serial/Vin Number: 00408C8DFC66 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

End of life

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: x Indicate how and by whom: Callahan Recycling Center

Auction: Where: Amount Received:

Other: Please describe:

Department Head Signature: [Signature] Date: 9-28-20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20080280 Acquisition Cost: \$920.00

Acquisition Date: 09/22/2008 Book Value: -0-

Financial Services Signature: [Signature] Date: 10/1/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:



10/01/2020 15:22
6235kulm

BOARD OF COMMISSIONERS
FIXED ASSET WORKSHEET

P 1
fams tmt

ASSET # 20080280	MASTER ASSET	DESCRIPTION	AXIS 215 NETWORK CAMERA
CLASS 40 MACHINERY & EQU	FUND SOURCE 01	MAINT CONT Y	INSURED N
SUBCL 952 NETWORK CAMERA	ACQUIS METH A1 PURCHASE	VENDOR DESC Vendor Name Mi	CARRIER
COMMODITY	ACQUIS DATE 09/22/2008	TYPE G	INSURED VAL 0.00
DEPT 0051 TAX COLLECTOR	ACQUIS COST 920.00	EXPIRE DATE	EXPIRE DATE
LOC CODE 446 TAX COLLECTOR-N	ACRES 0.000	ANNUAL COST 0.00	POLICY CST 0.00
LOC MEMO	QTY 1	MEMO	
ROOM	UNIT PRICE 0.00		
STORAGE LOC	PURCH MEMO		
STATUS A ACTIVE		DEPRECIATE Y	
CONDITION E EXCELLENT	SOY BOOK 0.00	DEPREC PRN 920.00	
CUSTODIAN TAX COLLECTOR	CURRENT BOOK 0.00	FIRST YR/PR 2008/12	LAST YR/PR 2013/11
TITLEHOLDER	EST SALVAGE 0.00	EST LIFE 5	
	REPL COST 920.00	PERIODS TAKEN 60	
TAG # 06127	LAST INVENT 07/27/2009	ACCUM DEPREC 920.00	
SERIAL #	IMPROVE MEMO		
MANUFACTURER	RETIRE DATE		
MODEL	DISP CODE		
MODEL YEAR	DISP PRICE 0.00		
LICENSE #	SALE PRICE 0.00		
VEND #	PO #	DOCUMENT #	INVOICE #
			INV DATE
			INV AMT

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98000	277101		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-186

DEPARTMENT: Tax Collector

TO BE COMPLETED BY DEPARTMENT:

Property Number: 06128 Mileage / Hours if applicable:

Year/Description: AXIS 215 NETWORK CAMERA

Serial/Vin Number: Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

End of life

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: x Indicate how and by whom: Callahan Recycling Center

Auction: Where: Amount Received:

Other: Please describe:

Department Head Signature: [Signature] Date: 9-28-20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20080281 Acquisition Cost: \$920.00

Acquisition Date: 09/22/2008 Book Value: -0-

Financial Services Signature: [Signature] Date: 10/1/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:



10/01/2020 15:05
6235kulm

BOARD OF COMMISSIONERS
FIXED ASSET WORKSHEET

P 1
famstnt

ASSET # 20080281	MASTER ASSET	DESCRIPTION	AXIS 215 NETWORK CAMERA
CLASS 40 MACHINERY & EQU	FUND SOURCE 01	MAINT CONT Y	INSURED N
SUBCL 952 NETWORK CAMERA	ACQUIS METH A1 PURCHASE	VENDOR DESC Vendor Name Mi	CARRIER
COMMODITY	ACQUIS DATE 09/22/2008	TYPE G	INSURED VAL 0.00
DEPT 0051 TAX COLLECTOR	ACQUIS COST 920.00	EXPIRE DATE	EXPIRE DATE
LOC CODE 446 TAX COLLECTOR-N	ACRES 0.000	ANNUAL COST 0.00	POLICY CST 0.00
LOC MEMO	QTY 1	MEMO	MEMO
ROOM	UNIT PRICE 0.00		
STORAGE LOC	PURCH MEMO		
STATUS A ACTIVE		DEPRECIATE Y	
CONDITION E EXCELLENT	SOY BOOK 0.00	DEPREC PRIN 920.00	
CUSTODIAN TAX COLLECTOR	CURRENT BOOK 0.00	FIRST YR/PR 2008/12	LAST YR/PR 2013/11
TITLEHOLDER	EST SALVAGE 0.00	EST LIFE 5	
	REPL COST 920.00	PERIODS TAKEN 60	
TAG # 06128	LAST INVENT 07/27/2009	ACCUM DEPREC 920.00	
SERIAL #	IMPROVE MEMO		
MANUFACTURER	RETIRE DATE		
MODEL	DISP CODE		
MODEL YEAR	DISP PRICE 0.00		
LICENSE #	SALE PRICE 0.00		
VEND #	PO #	DOCUMENT #	INVOICE #
			INV DATE
			INV AMT

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98000	277101		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT

DELETION FROM INVENTORY FORM

DI # 2020-187

DEPARTMENT: Tax Collector

TO BE COMPLETED BY DEPARTMENT:

Property Number: 06243 Mileage / Hours if applicable:

Year/Description: A/C MINI SPLIT - LG 11,500(1TON) BTU - CONDENSING/

Serial/Vin Number: 804KAXV00178 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

Broken

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: X Indicate how and by whom: Callahan Recycling Center

Auction: Where: Amount Received:

Other: Please describe:

Department Head Signature: [Signature] Date: 9-25-20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20090116 Acquisition Cost: \$2,088.96

Acquisition Date: 03/16/2009 Book Value: -0 -

Financial Services Signature: [Signature] Date: 10/1/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:



10/01/2020 15:06
6235kulm

BOARD OF COMMISSIONERS
FIXED ASSET WORKSHEET

P 1
famstmt

ASSET # 20090116	MASTER ASSET	DESCRIPTION 1 TON BTU A/C			
CLASS 40 MACHINERY & EQU	FUND SOURCE 01				
SUBCL 503 AIR CONDITIONER	ACQUIS METH A1 PURCHASE	MAINT CONT Y	INSURED N		
COMMODITY		VENDOR DESC Vendor Name Mi	CARRIER		
DEPT 0051 TAX COLLECTOR	ACQUIS DATE 03/16/2009	TYPE G	INSURED VAL	0.00	
LOC CODE 446 TAX COLLECTOR-N	ACQUIS COST 2,088.96	EXPIRE DATE	EXPIRE DATE		
LOC MEMO	ACRES 0.000	ANNUAL COST 0.00	POLICY CST	0.00	
ROOM	QTY 1	MEMO	MEMO		
STORAGE LOC	UNIT PRICE 0.00				
	PURCH MEMO				
STATUS A ACTIVE		DEPRECIATE Y			
CONDITION E EXCELLENT	SOY BOOK 0.02	DEPREC PRIN 2,088.96			
CUSTODIAN TAX COLLECTOR	CURRENT BOOK 0.02	FIRST YR/PR 2009/06	LAST YR/PR	2014/05	
TITLEHOLDER	EST SALVAGE 0.00	BST LIFE 5			
	REPL COST 2,088.96	PERIODS TAKEN 60			
TAG # 06243	LAST INVENT	ACCUM DEPREC 2,088.96			
SERIAL # 804KAXV00178	IMPROVE MEMO				
MANUFACTURER	RETIRE DATE				
MODEL	DISP CODE				
MODEL YEAR	DISP PRICE 0.00				
LICENSE #	SALE PRICE 0.00				
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98051	564000		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
-----	-----	------	--------

DELETION FROM INVENTORY FORM

DI # 2020-188

DEPARTMENT: Tax Collector

TO BE COMPLETED BY DEPARTMENT:

Property Number: 06379 Mileage / Hours if applicable:

Year/Description: A/C MINI SPLIT - LG 11,500 (1TON) BTU - CONDENSING

Serial/Vin Number: 902KAMZ00355 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

Broken

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: Indicate how and by whom: Callahan Recycling Center

Auction: Where: Amount Received:

Other: Please describe:

Department Head Signature: [Signature] Date: 9-28-20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20090296 Acquisition Cost: \$3,586.00

Acquisition Date: 09/22/2009 Book Value: -0-

Financial Services Signature: [Signature] Date: 10/1/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:



10/01/2020 15:07
6235kulm

BOARD OF COMMISSIONERS
FIXED ASSET WORKSHEET

P 1
famstmt

ASSET # 20090296	MASTER ASSET	DESCRIPTION	A/C MINI SPLIT LG 11,500 (TON) BTU
CLASS 40 MACHINERY & EQU	FUND SOURCE 01	MAINT CONT Y	INSURED N
SUBCL 503 AIR CONDITIONER	ACQUIS METH A1 PURCHASE	VENDOR DESC Vendor Name Mi	CARRIER
COMMODITY	ACQUIS DATE 09/22/2009	TYPE G	INSURED VAL 0.00
DEPT 0051 TAX COLLECTOR	ACQUIS COST 3,586.00	EXPIRE DATE	EXPIRE DATE
LOC CODE 446 TAX COLLECTOR-N	ACRES 0.000	ANNUAL COST 0.00	POLICY CST 0.00
LOC MEMO	QTY 1	MEMO	
ROOM	UNIT PRICE 0.00		
STORAGE LOC	PURCH MEMO		
STATUS A ACTIVE		DEPRECIATE Y	
CONDITION E EXCELLENT	SOY BOOK 0.05	DEPREC PRIN 3,586.00	
CUSTODIAN TAX COLLECTOR	CURRENT BOOK 0.05	FIRST YR/PR 2009/12	LAST YR/PR 2014/11
TITLEHOLDER	EST SALVAGE 0.00	EST LIFE 5	
	REPL COST 3,586.00	PERIODS TAKEN 60	
TAG # 06379	LAST INVENT	ACCUM DEPREC 3,586.00	
SERIAL # 902KAMZ00355	IMPROVE MEMO		
MANUFACTURER	RETIRE DATE		
MODEL	DISP CODE		
MODEL YEAR	DISP PRICE 0.00		
LICENSE #	SALE PRICE 0.00		
VEND #	PO #	DOCUMENT #	INVOICE #
			INV DATE
			INV AMT

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98051	564000		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
-----	-----	------	--------

DELETION FROM INVENTORY FORM

DI # 2020-189

DEPARTMENT: Tax Collector

TO BE COMPLETED BY DEPARTMENT:

Property Number: 06542 Mileage / Hours if applicable:

Year/Description: CISCO CATALYST 2960 24 PT

Serial/Vin Number: SFOC1401X07K Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

End of life

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: Indicate how and by whom: Callahan Recycling Center

Auction: Where: Amount Received:

Other: Please describe:

Department Head Signature: [Signature] Date: 9-28-20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20101189 Acquisition Cost: \$1,919.00

Acquisition Date: 09/30/2010 Book Value: -0-

Financial Services Signature: [Signature] Date: 10/1/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:



10/01/2020 15:08
6235kulm

BOARD OF COMMISSIONERS
FIXED ASSET WORKSHEET

P 1
famstmnt

ASSET # 20101189	MASTER ASSET	DESCRIPTION SWITCH-CISCO CATALYST 2960			
CLASS 40 MACHINERY & EQU	FUND SOURCE 01				
SUBCL 599 SWITCH	ACQUIS METH A1 PURCHASE				
COMMODITY		MAINT CONT Y INSURED N			
DEPT 0051 TAX COLLECTOR	ACQUIS DATE 09/30/2010	VENDOR DESC Vendor Name Mi CARRIER			
LOC CODE 446 TAX COLLECTOR-N	ACQUIS COST 1,919.00	TYPE G INSURED VAL 0.00			
LOC MEMO	ACRES 0.000	EXPIRE DATE EXPIRE DATE			
ROOM	QTY 1	ANNUAL COST 0.00 POLICY CST 0.00			
STORAGE LOC	UNIT PRICE 0.00	MEMO MEMO			
	PURCH MEMO CDWG				
STATUS A ACTIVE		DEPRECIATE Y			
CONDITION E EXCELLENT	SOY BOOK 0.11	DEPRECIATE PRIN 1,919.00			
CUSTODIAN TAX COLLECTOR	CURRENT BOOK 0.11	FIRST YR/PR 2010/12 LAST YR/PR 2015/11			
TITLEHOLDER	EST SALVAGE 0.00	EST LIFE 5			
	REPL COST 1,919.00	PERIODS TAKEN 60			
TAG # 06542	LAST INVENT	ACCUM DEPREC 1,919.00			
SERIAL # SF0C1401X07K	IMPROVE MEMO				
MANUFACTURER CISCO CISCO					
MODEL 2960	RETIRE DATE				
MODEL YEAR 2010	DISP CODE				
LICENSE #	DISP PRICE 0.00				
	SALE PRICE 0.00				
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98051	564000		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-190

DEPARTMENT: Tax Collector

TO BE COMPLETED BY DEPARTMENT:

Property Number: 06543 Mileage / Hours if applicable:

Year/Description: POWEREDGE R710

Serial/Vin Number: GHSV1 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

End of life

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: x Indicate how and by whom: Diesel Destructive Testing

Auction: Where: Amount Received:

Other: Please describe:

Department Head Signature: [Signature] Date: 7-28-20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20101190 Acquisition Cost: \$6,058.30

Acquisition Date: 09/30/2010 Book Value: -0-

Financial Services Signature: [Signature] Date: 10/1/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:



10/01/2020 15:08
6235kulm

BOARD OF COMMISSIONERS
FIXED ASSET WORKSHEET

P 1
famstmt

ASSET # 20101190	MASTER ASSET	DESCRIPTION	DELL POWEREDGE R710 RACK SERVER
CLASS 40 MACHINERY & EQU	FUND SOURCE 01	MAINT CONT Y	INSURED N
SUBCL 138 SERVER	ACQUIS METH A1 PURCHASE	VENDOR DESC Vendor Name Mi	CARRIER
COMMODITY	ACQUIS DATE 09/30/2010	TYPE G	INSURED VAL 0.00
DEPT 0051 TAX COLLECTOR	ACQUIS COST 6,058.30	EXPIRE DATE	EXPIRE DATE
LOC CODE 446 TAX COLLECTOR-N	ACRES 0.000	ANNUAL COST 0.00	POLICY CST 0.00
LOC MEMO	QTY 1	MEMO	MEMO
ROOM	UNIT PRICE 0.00		
STORAGE LOC	PURCH MEMO DELL COMPUTERS 001-208		
STATUS A ACTIVE	SOY BOOK 0.10	DEPRECIATE Y	
CONDITION E EXCELLENT	CURRENT BOOK 0.10	DEPREC PRIN 6,058.30	
CUSTODIAN TAX COLLECTOR	EST SALVAGE 0.00	FIRST YR/PR 2010/12	LAST YR/PR 2015/11
TITLEHOLDER	REPL COST 6,058.30	EST LIFE 5	
TAG # 06543	LAST INVENT	PERIODS TAKEN 60	
SERIAL # GHSV1	IMPROVE MEMO	ACCUM DEPREC 6,058.30	
MANUFACTURER DELL DELL	RETIRE DATE		
MODEL POWEREDGE R710	DISP CODE		
MODEL YEAR 2010	DISP PRICE 0.00		
LICENSE #	SALE PRICE 0.00		
VEND #	PO #	DOCUMENT #	INVOICE #
			INV DATE
			INV AMT

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98051	564000		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-191

DEPARTMENT: Tax Collector

TO BE COMPLETED BY DEPARTMENT:

Property Number: 06562 Mileage / Hours if applicable:

Year/Description: DELL LAPTOP PRECISION M4500

Serial/Vin Number: BT3R1M1 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

End of life

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: Indicate how and by whom: Callahan Recycling Center

Auction: Where: Amount Received:

Other: Please describe:

Department Head Signature: [Signature] Date: 9-28-20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20101209 Acquisition Cost: \$1,710.39

Acquisition Date: 09/30/2010 Book Value: -0-

Financial Services Signature: [Signature] Date: 10/1/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:



10/01/2020 15:09
6235kulm

BOARD OF COMMISSIONERS
FIXED ASSET WORKSHEET

P 1
famstmnt

ASSET # 20101209		MASTER ASSET		DESCRIPTION	COMPUTER-DELL M4500 LAPTOP	
CLASS 40	MACHINERY & EQU	FUND SOURCE 01		MAINT CONT Y		INSURED N
SUBCL 116	COMPUTER	ACQUIS METH A1	PURCHASE	VENDOR DESC	Vendor Name Mi	CARRIER
COMMODITY		ACQUIS DATE	09/30/2010	TYPE G		INSURED VAL
DEPT 0051	TAX COLLECTOR	ACQUIS COST	1,710.39	EXPIRE DATE		EXPIRE DATE
LOC CODE 446	TAX COLLECTOR-N	ACRES	0.000	ANNUAL COST	0.00	POLICY CST
LOC MEMO		QTY	1	MEMO		MEMO
ROOM		UNIT PRICE	0.00			
STORAGE LOC		PURCH MEMO	DELL COMPUTERS			
STATUS A	ACTIVE			DEPRECIATE Y		
CONDITION E	EXCELLENT	SOY BOOK	0.00	DEPREC PRIN	1,710.39	
CUSTODIAN	TAX COLLECTOR	CURRENT BOOK	0.00	FIRST YR/PR	2010/12	LAST YR/PR 2013/11
TITLEHOLDER		EST SALVAGE	0.00	EST LIFE	3	
		REPL COST	1,710.39	PERIODS TAKEN	36	
TAG # 06562		LAST INVENT		ACCUM DEPREC	1,710.39	
SERIAL # BT3R1M1		IMPROVE MEMO				
MANUFACTURER	DELL DELL					
MODEL	M4500	RETIRE DATE				
MODEL YEAR	2010	DISP CODE				
LICENSE #		DISP PRICE	0.00			
		SALE PRICE	0.00			
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT	

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98051	564000		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-192

DEPARTMENT: Tax Collector

TO BE COMPLETED BY DEPARTMENT:

Property Number: 09118 Mileage / Hours if applicable:

Year/Description: Mac Book Pro 13.3/3.1GHZ/16GB/1TB-USA

Serial/Vin Number: SC02RQ04RGQR6 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

End of life

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: X Indicate how and by whom: Destructive Testing

Auction: Where: Amount Received:

Other: Please describe:

Department Head Signature: [Signature] Date: 9-28-20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20170069 Acquisition Cost: \$2,549.99

Acquisition Date: 08/13/2016 Book Value: -0-

Financial Services Signature: [Signature] Date: 10/1/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date:

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

RECEIVED 2020 SEP 16 PM 4:46



10/01/2020 15:10
6235kulm

BOARD OF COMMISSIONERS
FIXED ASSET WORKSHEET

P 1
famstmnt

ASSET # 20170069	MASTER ASSET	DESCRIPTION	MAC BOOK PRO 13.3/3.1GHZ/16GB/1TB-USA		
CLASS 40	FUND SOURCE 01	MAINT CONT	Y		
SUBCL 116	MACHINERY & EQU COMPUTER	VENDOR DESC	Vendor Name Mi		
COMMODITY	ACQUIS METH A1 PURCHASE	TYPE	G		
DEPT 0051	TAX COLLECTOR	EXPIRE DATE			
LOC CODE 446	TAX COLLECTOR-N	ANNUAL COST	0.00		
LOC MEMO	ACQUIS DATE 08/13/2016	MEMO			
ROOM	ACQUIS COST 2,549.99				
STORAGE LOC	ACRES 0.000				
	QTY 1				
	UNIT PRICE 0.00				
	PURCH MEMO BEST BUY				
STATUS A	ACTIVE	DEPRECIATE	Y		
CONDITION E	EXCELLENT	DEPREC PRIN	2,549.99		
CUSTODIAN	TAX COLLECTOR	FIRST YR/PR	2016/11		
TITLEHOLDER		EST LIFE	3		
		PERIODS TAKEN	36		
TAG # 09118		ACCUM DEPREC	2,549.99		
SERIAL # SC02RQ04RGQR6	SOY BOOK				
MANUFACTURER	APPLE APPLE				
MODEL	MAC BOOK PRO				
MODEL YEAR					
LICENSE #					
	RETIRE DATE				
	DISP CODE				
	DISP PRICE		0.00		
	SALE PRICE		0.00		
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98051	564000		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-193

DEPARTMENT: Tax Collector

TO BE COMPLETED BY DEPARTMENT:

Property Number: 06819 Mileage / Hours if applicable:

Year/Description: R710 Server

Serial/Vin Number: 69C5WN1 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

End of life

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: * Indicate how and by whom: Callahan Recycling Center

Auction: Where: Amount Received:

Other: Please describe:

Department Head Signature: [Signature] Date: 9-28-20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20120019 Acquisition Cost: \$5,341.29

Acquisition Date: 09/20/2010 Book Value: -0-

Financial Services Signature: [Signature] Date: 10/1/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:



10/01/2020 15:10
6235kulm

BOARD OF COMMISSIONERS
FIXED ASSET WORKSHEET

P 1
famstmnt

ASSET # 20120019	MASTER ASSET	DESCRIPTION	DELL R710 SERVER		
CLASS 40	FUND SOURCE 01	MAINT CONT Y	INSURED N		
SUBCL 138	MACHINERY & EQU SERVER	VENDOR DESC	Vendor Name Mi		
COMMODITY	ACQUIS METH DE	TYPE G	CARRIER		
DEPT 0051	TAX COLLECTOR	EXP. DATE	INSURED VAL 0.00		
LOC CODE 446C	TAX COLLECTOR-E	ANNUAL COST	EXP. DATE 0.00		
LOC MEMO	ACQUIS DATE 09/20/2010	MEMO	POLICY CST		
ROOM	ACQUIS COST 5,341.29		MEMO		
STORAGE LOC	ACRES 0.000				
	QTY 1				
	UNIT PRICE 0.00				
	PURCH MEMO				
STATUS A	ACTIVE	DEPRECIATE Y			
CONDITION E	EXCELLENT	DEPREC PRIN	5,341.29		
CUSTODIAN	TAX COLLECTOR	FIRST YR/PR	2010/12		
TITLEHOLDER		EST LIFE	5		
	REPL COST 5,341.29	PERIODS TAKEN	60		
	LAST INVENT	ACCUM DEPREC	5,341.29		
	IMPROVE MEMO				
TAG # 06819					
SERIAL # 69C5WN1					
MANUFACTURER	DELL				
MODEL R710					
MODEL YEAR 2010					
LICENSE #					
	RETIRE DATE				
	DISP CODE				
	DISP PRICE 0.00				
	SALE PRICE 0.00				
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98051	564000		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI#2020-194

DEPARTMENT: Tax Collector

TO BE COMPLETED BY DEPARTMENT:

Property Number: 06603 Mileage / Hours if applicable:
Year/Description: Server - Dell Poweredge R710
Serial/Vin Number: 2TKC5M1 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):
End of life

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)
Destroy: X Indicate how and by whom: Callahan Recycling Center
Auction: Where: Amount Received:
Other: Please describe:

Department Head Signature: [Signature] Date: 9-28-20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20101250 Acquisition Cost: \$5,454.00
Acquisition Date: 03/30/2010 Book Value: -0-

Financial Services Signature: [Signature] Date: 10/1/20

BOARD APPROVAL:

Board of County Commissioners Chair:
Ex-Officio Clerk to the Board of County Commissioners:
Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:



10/01/2020 15:15
6235kulm

BOARD OF COMMISSIONERS
FIXED ASSET WORKSHEET

P 1
famsmnt

ASSET # 20101250	MASTER ASSET	DESCRIPTION	SERVER-DELL POWEREDGE R710
CLASS 40	MACHINERY & EQU	FUND SOURCE 01	
SUBCL 138	SERVER	ACQUIS METH A1	PURCHASE
COMMODITY		MAINT CONT Y	INSURED N
DEPT 0051	TAX COLLECTOR	VENDOR DESC	Vendor Name Mi
LOC CODE 446D	TAX COLLECTOR L	TYPE G	INSURED VAL 0.00
LOC MEMO		EXPIRE DATE	EXPIRE DATE
ROOM		ANNUAL COST	0.00
STORAGE LOC		MEMO	POLICY CST 0.00
		QTY 1	
		UNIT PRICE	0.00
		PURCH MEMO	PARAGON MICRO 01132516
STATUS A	ACTIVE		
CONDITION E	EXCELLENT	DEPRECIATE Y	
CUSTODIAN	DEPARTMENT HEAD	DEPREC PRIN	5,454.00
TITLEHOLDER		FIRST YR/PR	2010/06
		EST LIFE	5
		PERIODS TAKEN	60
		ACCUM DEPREC	5,454.00
SOY BOOK			
CURRENT BOOK			
EST SALVAGE			
REPL COST	5,454.00		
LAST INVENT			
IMPROVE MEMO			
RETIRE DATE			
DISP CODE			
DISP PRICE	0.00		
SALE PRICE	0.00		
VEND #	PO #	DOCUMENT #	INVOICE #
			INV DATE
			INV AMT

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98051	564000		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-195

DEPARTMENT: Tax Collector

TO BE COMPLETED BY DEPARTMENT:

Property Number: 08392 Mileage / Hours if applicable:

Year/Description: SERVER DELL PE R720

Serial/Vin Number: 6M7NZ12 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

End of life

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: x Indicate how and by whom: Callahan Recycling Center

Auction: Where: Amount Received:

Other: Please describe:

Department Head Signature: [Signature] Date: 9-25-20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20150083 Acquisition Cost: \$6,994.86

Acquisition Date: 09/14/2014 Book Value: -0-

Financial Services Signature: [Signature] Date: 10/1/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:



10/01/2020 15:16
6235kulm

BOARD OF COMMISSIONERS
FIXED ASSET WORKSHEET

P 1
famstmnt

ASSET # 20150083		MASTER ASSET		DESCRIPTION POWEREDGE R720 SERVER	
CLASS 40	MACHINERY & EQU	FUND SOURCE 01		MAINT CONT Y	INSURED N
SUBCL 138	SERVER	ACQUIS METH A1	PURCHASE	VENDOR DESC Vendor Name Mi	CARRIER
COMMODITY		ACQUIS DATE 09/14/2014		TYPE G	INSURED VAL 0.00
DEPT 0051	TAX COLLECTOR	ACQUIS COST 6,994.86		EXPIRE DATE	EXPIRE DATE
LOC CODE 446D	TAX COLLECTOR L	ACRES 0.000		ANNUAL COST 0.00	POLICY CST 0.00
LOC MEMO		QTY 1		MEMO	MEMO
ROOM		UNIT PRICE 0.00			
STORAGE LOC		PURCH MEMO DELL			
STATUS A	ACTIVE			DEPRECIATE Y	
CONDITION E	EXCELLENT	SOY BOOK 0.00		DEPREC PRIN 6,994.86	
CUSTODIAN	TAX COLLECTOR	CURRENT BOOK 0.00		FIRST YR/PR 2014/12	LAST YR/PR 2019/11
TITLEHOLDER		EST SALVAGE 0.00		EST LIFE 5	
		REPL COST 6,994.86		PERIODS TAKEN 60	
TAG # 08392		LAST INVENT		ACCUM DEPREC 6,994.86	
SERIAL # 6M7NZ12		IMPROVE MEMO			
MANUFACTURER DELL	DELL				
MODEL R720		RETIRE DATE			
MODEL YEAR		DISP CODE			
LICENSE #		DISP PRICE 0.00			
		SALE PRICE 0.00			
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98051	564000		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI #2020-196

DEPARTMENT: Tax Collector

TO BE COMPLETED BY DEPARTMENT:

Property Number: 08383 Mileage / Hours if applicable:

Year/Description: ReadyNas 2120 4-Bay 12TB

Serial/Vin Number: NETGE3GB336E80022B Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

End of life

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: Indicate how and by whom: Callahan Recycling Center

Auction: Where: Amount Received:

Other: Please describe:

Department Head Signature: [Signature] Date: 9-28-20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20150074 Acquisition Cost: \$2,543.56

Acquisition Date: 09/25/2013 Book Value: -0-

Financial Services Signature: [Signature] Date: 10/1/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:



10/01/2020 15:16
6235kulm

BOARD OF COMMISSIONERS
FIXED ASSET WORKSHEET

P 1
famstmt

ASSET # 20150074		MASTER ASSET		DESCRIPTION	READYNAS 2120 4-BAY 12TB ENT	
CLASS 40	MACHINERY & EQU	FUND SOURCE 01		MAINT CONT	Y	INSURED N
SUBCL 549	STORAGE AREA NE	ACQUIS METH A1	PURCHASE	VENDOR DESC	Vendor Name Mi	CARRIER
COMMODITY		ACQUIS DATE	09/25/2013	TYPE	G	INSURED VAL 0.00
DEPT 0051	TAX COLLECTOR	ACQUIS COST	2,543.56	EXPIRE DATE		EXPIRE DATE
LOC CODE 446D	TAX COLLECTOR L	ACRES	0.000	ANNUAL COST	0.00	POLICY CST 0.00
LOC MEMO		QTY	1	MEMO		MEMO
ROOM		UNIT PRICE	0.00			
STORAGE LOC		PURCH MEMO	NETGEAR			
STATUS A	ACTIVE			DEPRECIATE	Y	
CONDITION E	EXCELLENT	SOY BOOK	0.00	DEPREC PRIN		2,543.56
CUSTODIAN	TAX COLLECTOR	CURRENT BOOK	0.00	FIRST YR/PR	2013/12	LAST YR/PR 2018/11
TITLEHOLDER		EST SALVAGE	0.00	EST LIFE	5	
		REPL COST	2,543.56	PERIODS TAKEN	60	
TAG # 08383		LAST INVENT		ACCUM DEPREC		2,543.56
SERIAL # 3GB336E80022B		IMPROVE MEMO				
MANUFACTURER NETGE	NETGEAR					
MODEL		RETIRE DATE				
MODEL YEAR		DISP CODE				
LICENSE #		DISP PRICE	0.00			
		SALE PRICE	0.00			
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT	

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98051	564000		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-197

DEPARTMENT: Tax Collector

TO BE COMPLETED BY DEPARTMENT:

Property Number: 08648 Mileage / Hours if applicable:

Year/Description: Macbook Air 133/1 4ghz/4gb/256

Serial/Vin Number: C02MX812G086 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

End of life

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: Indicate how and by whom: Destructive Testing

Auction: Where: Amount Received:

Other: Please describe:

Department Head Signature: Date: 9-28-20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20150855 Acquisition Cost: \$1,199.99

Acquisition Date: 10/28/2014 Book Value: -0-

Financial Services Signature: Kari Almer Date: 10/1/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date:

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

RECEIVED

2020 SEP 29 PM 5:37

OFFICE
FINANCIAL SERVICES
NASSAU COUNTY FL



10/01/2020 15:19
6235kulm

BOARD OF COMMISSIONERS
FIXED ASSET WORKSHEET

P 1
famstmt

ASSET # 20150855	MASTER ASSET	DESCRIPTION	MACBOOK AIR 133/1 4GHZ/4GB/256		
CLASS 40 MACHINERY & EQU	FUND SOURCE 01	MAINT CONT	Y		
SUBCL 116 COMPUTER	ACQUIS METH A1 PURCHASE	VENDOR DESC	Vendor Name Mi		
COMMODITY		INSURED	N		
DEPT 0051 TAX COLLECTOR	ACQUIS DATE 10/28/2014	TYPE	G		
LOC CODE 446D TAX COLLECTOR L	ACQUIS COST 1,199.99	INSURED VAL	0.00		
LOC MEMO	ACRES 0.000	EXP. DATE			
ROOM	QTY 1	ANNUAL COST	0.00		
STORAGE LOC	UNIT PRICE 0.00	MEMO			
	PURCH MEMO BEST BUY				
STATUS A ACTIVE		DEPRECIATE	Y		
CONDITION E EXCELLENT	SOY BOOK 0.00	DEPREC PRIN	1,199.99		
CUSTODIAN TAX COLLECTOR	CURRENT BOOK 0.00	FIRST YR/PR	2015/01		
TITLEHOLDER	EST SALVAGE 0.00	LAST YR/PR	2017/12		
	REPL COST 1,199.99	EST LIFE	3		
TAG # 08648	LAST INVENT	PERIODS TAKEN	36		
SERIAL #	IMPROVE MEMO	ACCUM DEPREC	1,199.99		
MANUFACTURER APPLE APPLE					
MODEL MACBOOK AIR	RETIRE DATE				
MODEL YEAR	DISP CODE				
LICENSE #	DISP PRICE 0.00				
	SALE PRICE 0.00				
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98051	564000		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-198

DEPARTMENT: Fire Rescue

TO BE COMPLETED BY DEPARTMENT:

Property Number: 9909 Mileage / Hours if applicable: _____

Year/Description: 2019 Genesis E-Force C-195 Cutter

Serial/Vin Number: 1904ES196 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): This tool is to be traded in for a Genesis E-Force C-236 Cutter. Upgrading Cutter will standardized all Fire Rescue Extrication Equipment. Trade in value is for full price at date of purchase.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: _____ Indicate how and by whom: _____

Auction: _____ Where: _____ Amount Received: _____

Other: _____ Please describe: _____

Department Head Signature:  Date: 9-9-20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20190213 Acquisition Cost: \$9,535.80

Acquisition Date: 07/02/2019 Book Value: \$7,310.78

Financial Services Signature:  Date: 10/1/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____



10/01/2020 17:21
6235kulm

BOARD OF COMMISSIONERS
FIXED ASSET WORKSHEET

P 1
famstnt

ASSET # 20190213	MASTER ASSET	DESCRIPTION	EXTRICATION TOOL-CL95 NXTGEN EFORCE
CLASS 40 MACHINERY & EQU	FUND SOURCE 01	MAINT CONT Y	INSURED N
SUBCL 804 RESCUE TOOL	ACQUIS METH A1 PURCHASE	VENDOR DESC Vendor Name Mi	CARRIER
COMMODITY		TYPE G	INSURED VAL
DEPT 0223 FIRE DEPT	ACQUIS DATE 07/02/2019	EXPIRE DATE	EXPIRE DATE 0.00
LOC CODE 567 ENGINE 71	ACQUIS COST 9,535.80	ANNUAL COST	POLICY CST 0.00
LOC MEMO	ACRES 0.000	MEMO	MEMO
ROOM	QTY 1		
STORAGE LOC	UNIT PRICE 0.00		
	PURCH MEMO 04223522-564002 RESCUE		
STATUS A ACTIVE			
CONDITION E EXCELLENT	SOY BOOK 9,059.01	DEPRECIATE Y	
CUSTODIAN DEPT HEAD	CURRENT BOOK 7,310.78	DEPREC PRIN	9,535.80
TITLEHOLDER	EST SALVAGE 0.00	FIRST YR/PR 2019/10	LAST YR/PR 2020/11
	REPL COST 9,535.80	EST LIFE 5	
TAG # 09909	LAST INVENT	PERIODS TAKEN 14	
SERIAL # 1904EZ196	IMPROVE MEMO	ACCUM DEPREC	2,225.02
MANUFACTURER GENES GENESIS RESCUE			
MODEL ART.108.234.3	RETIRE DATE		
MODEL YEAR	DISP CODE		
LICENSE #	DISP PRICE 0.00		
	SALE PRICE 0.00		
VEND #	PO #	DOCUMENT #	INVOICE #
			INV DATE
			INV AMT

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98052	564000		100.00
5	DEPRECIATION EXPENSE	98052	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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ES-077



Quote

Date	Quote #
9/2/20	20-384.

Name / Address
NASSAU COUNTY FIRE 96160 NASSAU PLACE YULEE, FL 32097

Rescue Systems Unlimited 2924 Crescent Dr. Unit A Tallahassee, Fl. 32301
Hal Eastman Hal.eastman@genesisrescue.com

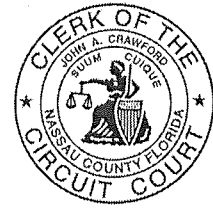
Terms
Net 30

Item	Description	Qty	Cost	Total
EFC236.ART.109.351.4S	C236-SL3 EFORCE 3.0 STANDARD BLADES W/2 Batteries	1	12,345.00	12,345.00
EFC195.ART.108.234.3	C195 NXTGEN CUTTER EFORCE (return credit)	1	-9,080.00	-9,080.00
Freight (FOB)	FREIGHT ON BOARD		75.00	75.00

	Total	\$3,340.00
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JOHN A. CRAWFORD
Clerk of the Circuit Court and Comptroller
 Ex-Officio Clerk to the Board of County Commissioners
 Auditor, Recorder and Custodian of All County Funds
 Nassau County



MEMORANDUM

To: Megan Sawyer, OMB

From: Kari Ulmer, Clerk Financial Services

Date: 10/1/20

Re: Deletion of Inventory

Please present the below Deletion from Inventory request(s) to the Board for approval:
 The original forms are attached.

DI #	Asset #	Tag #	Department
20.118	20070146	5472	Facilities Maint
20.119	20101256	6609	County Manager
20.120	20150736	8529	Code Enforcement
20.121	20080049	5876	County Attorney
20.122	20080051	5877	County Attorney
20.123	20070304	5618	County Attorney
20.124	20030041	0241	Property Appraiser
20.125	20030042	0242	Property Appraiser
20.126	20030040	0243	Property Appraiser
20.127	20101287	6640	Property Appraiser
20.128	20140062	7598	Property Appraiser
20.129	20150016	7789	Animal Control
20.130	20150041	8346	Animal Control
20.131	20150155	8429	Animal Control
20.132	20150185	7858	Animal Control
20.133	20090084	6216	Animal Control
20.134	20060265	3533	Clerk of Court
20.135	20160175	8835	Building Dept
20.136	20160244	8970	Building Dept
20.137	20160260	8990	Building Dept
20.138	20170062	9111	Building Dept

20.139	20050093	3220	SOE
20.140	20140206	7753	SOE
20.141	20140207	7754	SOE
20.142	20070304	BC 377	State Attorney
20.143	20020192	7397	Health Dept
20.144	20020193	7398	Health Dept
20.145	20010904	EH 2	Health Dept
20.146	20040040	7399	Health Dept
20.147	20070504	5797	Health Dept
20.148	20120055	6858	Health Dept
20.149	20120056	6859	Health Dept
20.150	20120058	6861	Health Dept
20.151	20130318	7385	Health Dept
20.152	20130321	7388	Health Dept
20.153	20130322	7389	Health Dept
20.154	20150148	8414	Health Dept
20.155	20160043	8714	Health Dept
20.156	20170075	9124	Health Dept
20.157	20170088	9138	Health Dept
20.158	20170091	9141	Health Dept
20.159	20170099	9148	Health Dept
20.160	20170169	9219	Health Dept
20.166	20160100	8764	Health Dept
20.167	20140096	7636	Health Dept
20.168	20150857	8650	Health Dept
20.169	20160182	8843	Health Dept
20.170	20160101	8765	Health Dept
20.171	20120037	6840	Health Dept
20.172	20140104	7644	Health Dept
20.173	20110097	6785	Road & Bridge
20.174	20140058	7594	Road & Bridge
20.175	20011814	1379	Road & Bridge
20.176	20020191	1487	Road & Bridge
20.177	20140072	7610	Facilities Maint
20.178	20020018	1959	Fire Rescue
20.179	20020021	1979	Fire Rescue
20.180	20020016	1898	Fire Rescue
20.181	20020020	1941	Fire Rescue
20.182	20080038	5865	Fire Rescue
20.183	20190213	9909	Fire Rescue
20.184	20011406	1480	Road & Bridge

DELETION FROM INVENTORY FORM

DI # 2020-118

DEPARTMENT: Facilities Maintenance/Parks & Rec. Dept.

TO BE COMPLETED BY DEPARTMENT:

Property Number: Asset# 20070146 Tag# 5472 Mileage / Hours if applicable: Unknown
Year/Description: 2007 10K.W Generator
Serial/Vin Number: R261756 Indicate if a photo is included Yes

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

Generator was sold on the Auction in May, the Assistant Director at the time had asked the employee running the auction site, if the item was approved to be auctioned, the employee told him it was. (9/4/2020) Staff researched the auction documents and confirmed this item was auctioned in May 2020

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)
Destroy: Indicate how and by whom:
Auction: X Where: GOV Deals (see attached documents.) Amount Received: \$ 722.25
Other: Please describe:

Department Head Signature: Doug Podiak - Public Works Director Date: 9-10-20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20070146 Acquisition Cost: \$1,900.00
Acquisition Date: 06/22/2007 Book Value: -0-

Financial Services Signature: Kari Uemer Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

ASSET # 20070146	MASTER ASSET	DESCRIPTION	GENERATOR	10KW	(GREEN)	
	ADD'L DESC	BUREAU OF FEDERAL PROPERTY ASSISTANCE				
CLASS 40	MACHINERY & EQU	FUND SOURCE 01				
SUBCL 519	GENERATOR	ACQUIS METH A1 PURCHASE	MAINT CONT Y		INSURED N	
COMMODITY			VENDOR DESC	Vendor Name Mi	CARRIER	
DEPT 0191	FACILITIES MAIN	ACQUIS DATE 06/22/2007	TYPE G		INSURED VAL	0.00
LOC CODE 129	BLDG MAINT SHOP	ACQUIS COST 1,900.00	EXPIRE DATE		EXPIRE DATE	
LOC MEMO	ACRES	0.000	ANNUAL COST	0.00	POLICY CST	0.00
ROOM	QTY	1	MEMO		MEMO	
STORAGE LOC	UNIT PRICE	0.00				
	PURCH MEMO	BFPA 01191519-564000				
STATUS A	ACTIVE					
CONDITION G	GOOD	SOY BOOK 0.00	DEPRECIATE Y			
CUSTODIAN	DEPT HEAD	CURRENT BOOK 0.00	DEPREC PRIN	1,900.00		
TITLEHOLDER		EST SALVAGE 0.00	FIRST YR/PR	2007/09	LAST YR/PR	2012/08
		REPL COST 1,900.00	EST LIFE	5		
TAG # 5472		LAST INVENT 07/21/2009	PERIODS TAKEN	60		
SERIAL # R261756		IMPROVE MEMO	ACCUM DEPREC	1,900.00		
MANUFACTURER						
MODEL LIBBEY		RETIRE DATE				
MODEL YEAR		DISP CODE				
LICENSE #		DISP PRICE 0.00				
		SALE PRICE 0.00				
VEND # 4693	PO # 7000645	DOCUMENT # S2-7547	INVOICE # S2-7547	INV DATE 06/22/2007	INV AMT 1,900.00	

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98000	277101		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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5472



306



5/22/2020

[Remove Tax](#) | [Print](#) | [Email](#) | [Edit](#) | [Close](#)

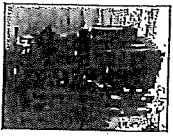
Nassau County Board of County Commissioners, FL
96135 Nassau Pl
Suite 2
Yulee, FL 32097-8635

Bill of Sale Date: 20 May 2020
Asset ID: 306

Bill of Sale Number: 5202020
Inventory ID: FM-20-61

Description of Property	Award Amount
DOD Generator	675.00

Asset Information



Year: **Make/Brand:** **Model:** **VIN/Serial:**

Meter: **Title Restriction:** Not Applicable

Sale Information

*** Actual Sold Amount:** USD \$675.00 **Paid On:** 20 May 2020 by PayPal

Other Amount: USD \$0.00 **Other Amount Description:**

Buyer's Premium: USD \$84.37 **Tax Rate:** 7%

Tax Amount: USD \$47.25

Total Amount: USD \$806.62 *** Taxable Items**

aul hahn
411 Parrot Way
ongwood, FL 32750
SA
chie7g@yahoo.com
362352844

Asset is sold as is, where is and without warranty. Once the asset is removed from the seller's premises there is no refund of monies previously paid.

Buyer/Agent Signature:

Print Name: PAUL HAHN

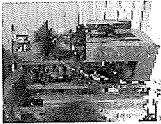
Date: MAY 22 2020

GovDeals Seller's Certificate: 306-0520201330-5579

Congratulations, Nassau County Board of County Commissioners, FL has sold another item on the GovDeals Auction Server.

BUYER (#1092140)	
Name:	paul hahn
Company:	hahn,paul
Title To:	paul hahn
Phone:	386-235-2844
Email:	techie7g@yahoo.com
Address:	1411 Parrot Way Longwood, FL 32750

SELLER (#5579)	
Agency:	Nassau County Board of County Commissioners, FL
Contact:	Anthony Swift
Phone:	904-855-7175
Email:	aswift@nassaucountyfl.com
Address:	45195 Mussel White Road Suite 2 Callahan, FL 32011

ITEM INFORMATION FOR ASSET ID: 306			
Item:	<u>DOD Generator</u> 		
Pick Up Location:	<u>45195 Musselwhite Rd, Callahan, FL 32011-3514</u>		
Inventory ID:	FM-20-61	Account ID:	5579
Condition:	Used/See Description	Quantity:	1 each
Make/Brand:	Not Provided	Model:	Not Provided
VIN/Serial:	Not Provided	Model Year:	Not Provided
Meter:	Not Provided	Title Restrictions:	Not Applicable

Date	Item		Amount
20 May 2020 01:30 PM ET	DOD Generator		USD \$675.00
	Tax	7.000000%	USD \$47.25
	Buyer's Premium	12.50%	USD \$84.37
		Total	USD \$806.62

Payment Instructions:

Payment methods for this item are Wire Transfer, PayPal, or credit cards (Visa, Mastercard, American Express*, Discover) only. * American Express is not available for buyers on probation. PayPal and credit card purchases are limited to below 5,000.00 and Bidders residing in the United States, Canada and Mexico Only. If the winning bid plus applicable taxes, if any indicated,

plus the buyer's premium equals to 5,000.00 or more, Wire Transfer must be used. Buyers on level one probation have a PayPal and Credit Card limit of \$1,000. If Wire Transfer is chosen, a Wire Transfer Transaction Summary page will provide payment and account information. The Wire Transfer must be completed within 5 days unless otherwise specified below.

FSS PAYMENT PAYMENT MUST BE MADE ONLINE-- To make online payment, Log into your Liquidity Services account and select "My Bids". Please follow the instructions there. Payment in full is due not later than five (5) business days from the time and date of the close of the auction. Payment must be made electronically via the payment methods listed below.

TAX EXEMPTION TAX EXEMPTION: Where taxes are applicable (see the Buyer's Certificate), Tax Exempt documents must be provided to this seller within 24 hours of the auctions close and before payment is made. Please use the "Ask a Question" feature to for all questions.

Removal Instructions:

REMOVAL

Property may be removed by appointment only and appointments must be made at least 24 hours in advance. All items must be removed within ten (10) business days from the time and date of the close of the auction.

The Buyer will make all arrangements and perform all work necessary, including packing, loading and transportation of the property. No Assistance will be provided. A daily storage fee of \$10.00 may be charged for any item not removed within the 10 business days allowed and stated on the Buyer's Certificate.

Special Instructions:

NOTICE: If you are the winning bidder and default by failing to adhere to this sellers terms and conditions your account with Liquidity Services WILL BE LOCKED.

Guaranty Waiver. All property is offered for sale "AS IS, WHERE IS." (Seller) makes no warranty, guaranty or representation of any kind, expressed or implied, as to the merchantability or fitness for any purpose of the property offered for sale. Please note that upon removal of the property, all sales are final.

Description Warranty. Seller warrants to the Buyer that the property offered for sale will conform to its description. Any claim for misdescription must be made prior to removal of the property. If Seller confirms that the property does not conform to the description, Seller will keep the property and refund any money paid. The liability of the seller shall not exceed the actual purchase price of the property.

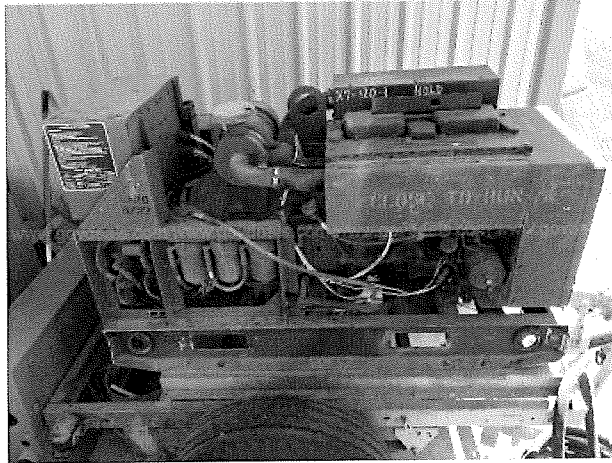
Description:

DOD Generator. Last time it was started was mid 2019. Ran for approximately 1 hour. Does NOT include trailer. Refer to Inventory ID FM-20-43 for same model being sold for parts.

Search Auctions



[Advanced Search](#)



DOD Generator

Auction Closed
 High Bidder: **h*****2**
 Sold Amount: **\$675.00**
 Tax (7.000000%): **\$47.25**
 Buyer's Premium (12.50%): **\$84.37**
 Total Price: **\$806.62**

[View Bid History](#)

[Terms and Conditions](#)

1,055 visitors

Condition	Category	Inventory ID
Used/See Description	Generators	FM-20-61

DOD Generator. Last time it was started was mid 2019. Ran for approximately 1 hour. Does NOT include trailer. Refer to Inventory ID FM-20-43 for same model being sold for parts.

? Questions and Answers

Q: Hi how many hours? thanks (5/7/20 10:37 AM)

A: Good afternoon. The Gauge reads 485.3 hours. (5/7/20 11:20 AM)

Q: whats the kw (5/11/20 1:38 AM)

A: Good morning and thank you for your interest in the DOD Generator. The Generator is 10KW and is both single phase and 3 phase. Single phase is 120V/240V 3 phase is 120V/208V Thank you for your interest. (5/20/20 10:56 AM)

Q: Is this unit single or 3 phase ? (5/11/20 7:17 AM)

A: Good morning and thank you for your interest in the DOD Generator. The Generator is 10KW and is both single phase and 3 phase. Single phase is 120V/240V 3 phase is 120V/208V Thank you for your interest. (5/20/20 10:57 AM)

Q: How many KW is it? (5/12/20 9:06 AM)

A: Good morning and thank you for your interest in the DOD Generator. The Generator is 10KW and is both single phase and 3 phase. Single phase is 120V/240V 3 phase is 120V/208V Thank you for your interest. (5/20/20 10:56 AM)

Q: Single or three phase? (5/13/20 8:03 AM)

A: Good morning and thank you for your interest in the DOD Generator. The Generator is 10KW and is both single phase and 3 phase. Single phase is 120V/240V 3 phase is 120V/208V Thank you for your interest. (5/20/20 10:56 AM)

Q: how many kw is this? thanks (5/15/20 8:39 AM)

A: Good morning and thank you for your interest in the DOD Generator. The Generator is 10KW and is both single phase and 3 phase. Single phase is 120V/240V 3 phase is 120V/208V Thank you for your interest. (5/20/20 10:56 AM)



08/07/2020 10:38
6235kulm

BOARD OF COMMISSIONERS
2020 INVENTORY

P 1
faloclst

FACILITIES MAINTENANCE

DEPT ROOM	TAG # ASSET #	SUB CLASS DESCRIPTION	MANUF SERIAL #	CUSTODIAN	QTY	ACQUIS DATE EST LIFE	ACQUIS COST CURR BOOK	REPLACE COST	REMARKS STATUS	CAPITALIZE?
LOCATION: 129 B MAINT SH										
0191	06701 <u>20110001</u>	BUCKET TRUCK CN#FMD310 BUCKET TRUCK MODEL AM550H - UNITE TYPE: ALTEC UNIT SERIAL - 0293-R2163	INTNLHTSDPPN4PH512298	DEPT HEAD	1	10/15/2010 10	14,300.00 357.57	14,300.00	ACTIVE	Y
TAG NUMBER: 06766										
0191	06766 <u>20110072</u>	AIR CONDITIONER MOVIN0611-0452-600 AIR CONDITIONER-PORTABLE - OFF DEPT HEAD 50A NEMA 6-50P WITH KIT, 'TILE CEILING 16"X8' BELTED CUFF FACILITIES MA INT WAREHOUSE	0611-0452-600	DEPT HEAD	1	09/30/2011 5	7,230.79 .11	7,230.79	ACTIVE	Y
TAG NUMBER: 08935										
0191	08935 <u>20020187</u>	SPRAYER SPRAYER 55 GAL. 150 PSI	NORTH2699	DEPT HEAD		08/27/2002 3	1,188.47 .00	1,188.47	ACTIVE	Y
TAG NUMBER: 08936										
0191	08936 <u>20010821</u>	TRAILER-TRANSPO UTILITY TRAILER	UT-16	DEPT HEAD		04/01/1994 10	999.00 .00	999.00	ACTIVE	Y
TAG NUMBER: 08937										
0191	08937 <u>20060320</u>	MISC EQUIPMENT UNIVE CODE KEY MACHINE 110 VAC CODE MACHINE W/112 CODE C		DEPT HEAD	1	09/30/2006 5	1,850.00 .00	1,850.00	ACTIVE	Y
TAG NUMBER: 08972										
0191	08972 <u>20080104</u>	SPRAYER GMAX II 5900 PREM HB SPRAYER		DEPT HEAD	1	07/11/2008 3	3,729.85 .00	3,729.85	ACTIVE	Y
TAG NUMBER: 2037										
0191	2037 <u>20011781</u>	ICE MACHINE ICE MACHINE SILVER EAGLE MANUFACTURING 01191519-564000	HOSHIK-M-500 MAF	DEPT HEAD		03/16/2001 10	2,308.51 .00	2,308.51	ACTIVE	Y
TAG NUMBER: 5472										
0191	5472 <u>20070146</u>	GENERATOR GENERATOR 10KW (GREEN) BUREAU OF FEDERAL PROPERTY ASSISTANCE	R261756	DEPT HEAD	1	06/22/2007 5	1,900.00 .00	1,900.00	ACTIVE	Y
LOCATION 129 TOTALS					COUNT:	8	33,506.62 357.68	33,506.62		

Double To Local

DELETION FROM INVENTORY FORM

DI# 2020-119

DEPARTMENT: County Manager's Office

TO BE COMPLETED BY DEPARTMENT:

Property Number: Tag #6609 / Asset # 20101256 Mileage / Hours if applicable: N/A

Year/Description: Dell Optiplex 960

Serial/Vin Number: Serial # 7KQLKN1 Indicate if a photo is included No

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

At 10 years old, the computer is outdated and cannot meet the speed/demand needed to operate properly with today's technology

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.02 please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: X Indicate how and by whom: Recycled at convenience center by I.T.

Auction: Where: Amount Received:

Other: Please describe:

Department Head Signature: Date:

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 2010 1256 Acquisition Cost: \$1,125.00

Acquisition Date: 09/30/2010 Book Value: -0-

Financial Services Signature: Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date:

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

RECEIVED 2020 SEP 15 PM 4:29

ASSET # 20101256	MASTER ASSET	DESCRIPTION	COMPUTER-OPTPLEX 960 SMALL FORM FACTOR		
CLASS 40 MACHINERY & EQU	FUND SOURCE 01	MAINT CONT	Y		
SUBCL 116 COMPUTER	ACQUIS METH A1 PURCHASE	INSURED	N		
COMMODITY		VENDOR DESC	Vendor Name Mi CARRIER		
DEPT 0121 COUNTY MANAGER	ACQUIS DATE 09/30/2010	TYPE	G		
LOC CODE 124 ADMINISTRATIVE	ACQUIS COST 1,125.00	INSURED VAL	0.00		
LOC MEMO	ACRES 0.000	EXPIRE DATE	EXPIRE DATE		
ROOM	QTY 1	ANNUAL COST	0.00		
STORAGE LOC	UNIT PRICE 0.00	POLICY CST	0.00		
	PURCH MEMO PARAGON MICRO 01135519	MEMO	MEMO		
STATUS A ACTIVE					
CONDITION E EXCELLENT	SOY BOOK 0.00	DEPRECIATE	Y		
CUSTODIAN DEPT HEAD	CURRENT BOOK 0.00	DEPREC PRIN	1,125.00		
TITLEHOLDER	EST SALVAGE 0.00	FIRST YR/PR	2011/02		
	REPL COST 1,125.00	LAST YR/PR	2014/01		
TAG # 06609 *	LAST INVENT	EST LIFE	3		
SERIAL # 7KQLKN1 /	IMPROVE MEMO	PERIODS TAKEN	36		
MANUFACTURER DELL DELL		ACCUM DEPREC	1,125.00		
MODEL OPTIPLEX 960 .	RETIRE DATE				
MODEL YEAR 2010	DISP CODE				
LICENSE #	DISP PRICE 0.00				
	SALE PRICE 0.00				
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98051	564000		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
-----	-----	------	--------

DELETION FROM INVENTORY FORM

DI # 2020-120

DEPARTMENT: Code Enforcement

TO BE COMPLETED BY DEPARTMENT:

Property Number: 08529 Mileage / Hours if applicable: _____

Year/Description: 2015 0736 Dell Optiplex 7020

Serial/Vin Number: 15MOV52 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

Out dated

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: Indicate how and by whom: IT Dept - recycle - E-Scrap

Auction: _____ Where: _____ Amount Received: _____

Other: _____ Please describe: _____

Department Head Signature: [Signature] Date: 8/31/20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20150736 Acquisition Cost: \$799.00

Acquisition Date: 09/25/2015 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date: _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

09/25/2020 11:00
6235kulm

|BOARD OF COMMISSIONERS
|FIXED ASSET WORKSHEET

|P 1
|famstmnt

ASSET #	20150736	MASTER ASSET		DESCRIPTION	DELL OPTIPLEX 7020			
CLASS	40	MACHINERY & EQU	FUND SOURCE 01					
SUBCL	116	COMPUTER	ACQUIS METH A1	PURCHASE	MAINT CONT	Y	INSURED	N
COMMODITY					VENDOR DESC	Vendor Name Mi	CARRIER	
DEPT	0243	CODE ENFORCEMEN	ACQUIS DATE	09/25/2015	TYPE	G	INSURED VAL	0.00
LOC CODE	348	CODE ENFORCEMEN	ACQUIS COST	799.00	EXPIRE DATE		EXPIRE DATE	
LOC MEMO			ACRES	0.000	ANNUAL COST	0.00	POLICY CST	0.00
ROOM			QTY	1	MEMO		MEMO	
STORAGE LOC			UNIT PRICE	0.00				
			PURCH MEMO	04243524-564000	DELL			
STATUS	A	ACTIVE						
CONDITION	E	EXCELLENT	SOY BOOK	0.00	DEPRECIATE	Y		
CUSTODIAN	DEPT HEAD		CURRENT BOOK	0.00	DEPREC PRIN		799.00	
TITLEHOLDER			EST SALVAGE	0.00	FIRST YR/PR	2015/12	LAST YR/PR	2018/11
			REPL COST	799.00	EST LIFE	3		
TAG #	08529	/	LAST INVENT		PERIODS TAKEN	36		
SERIAL #	15M0V52	'	IMPROVE MEMO		ACCUM DEPREC	799.00		
MANUFACTURER	DELL	DELL						
MODEL	OPTIPLEX 7020		RETIRE DATE					
MODEL YEAR			DISP CODE					
LICENSE #			DISP PRICE	0.00				
			SALE PRICE	0.00				

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98052	564000		100.00
5	DEPRECIATION EXPENSE	98052	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-121

DEPARTMENT: County Attorney

TO BE COMPLETED BY DEPARTMENT:

Property Number: 5876 Mileage / Hours if applicable: _____

Year/Description: Dell Optiplex 755

Serial/Vin Number: HTVZ4G1 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

Outdated Computer

RECEIVED
2020 SEP 15 AM 8:04
COUNTY CLERK
FLORIDA COUNTY

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

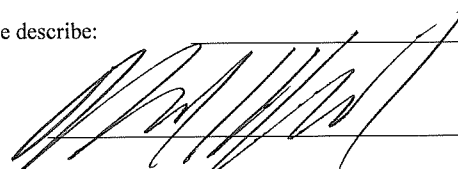
Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: XX Indicate how and by whom: IT Department -Recycle E-Scrap

Auction: _____ Where: _____ Amount Received: _____

Other: _____ Please describe: _____

Department Head Signature:  Date: 9/14/20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20080049 Acquisition Cost: \$773.11

Acquisition Date: 06/06/2008 Book Value: -0-

Financial Services Signature:  Date: 9/28/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET # 20080049	MASTER ASSET	DESCRIPTION	DELL OPTIPLEX 755		
	ADD'L DESC HTVZ4G1				
CLASS 40	MACHINERY & EQU	FUND SOURCE 01			
SUBCL 116	COMPUTER	ACQUIS METH A1 PURCHASE			
COMMODITY		MAINT CONT Y	INSURED N		
DEPT 0141	COUNTY ATTORNEY	VENDOR DESC Vendor Name Mi	CARRIER		
LOC CODE 230	COUNTY ATTORNEY	TYPE G	INSURED VAL 0.00		
LOC MEMO	ACRES 0.000	EXPIRE DATE	EXPIRE DATE		
ROOM	QTY 1	ANNUAL COST 0.00	POLICY CST 0.00		
STORAGE LOC	UNIT PRICE 0.00	MEMO	MEMO		
	PURCH MEMO 01141514-564000				
STATUS A	ACTIVE	DEPRECIATE Y			
CONDITION E	EXCELLENT	DEPREC PRIN 773.11			
CUSTODIAN	COUNTY ATTORNEY	FIRST YR/PR 2008/09	LAST YR/PR 2011/08		
TITLEHOLDER	EST SALVAGE 0.00	EST LIFE 3			
	REPL COST 773.11	PERIODS TAKEN 36			
TAG # 05876	LAST INVENT 06/12/2009	ACCUM DEPREC 773.11			
SERIAL # HTVZ4G1	IMPROVE MEMO				
MANUFACTURER	DELL DELL				
MODEL	RETIRE DATE				
MODEL YEAR	DISP CODE				
LICENSE #	DISP PRICE 0.00				
	SALE PRICE 0.00				
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98000	277101		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI# 2020-122

DEPARTMENT: County Attorney

TO BE COMPLETED BY DEPARTMENT:

Property Number: 5877 Mileage / Hours if applicable: _____

Year/Description: Dell Optiplex 755

Serial/Vin Number: BRCN6G1 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

Outdated Computer

RECEIVED
2020 SEP 15 AM 8:09
CLERK OF COUNTY
KANSAS COUNTY, MO

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

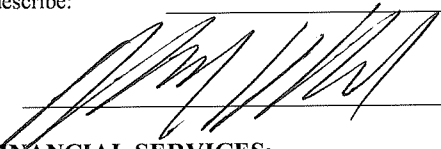
Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: XX Indicate how and by whom: IT Department - Recycle E-Scrap

Auction: _____ Where: _____ Amount Received: _____

Other: _____ Please describe: _____

Department Head Signature:  Date: 9/15/20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20080051 Acquisition Cost: \$773.11

Acquisition Date: 06/06/2008 Book Value: -0-

Financial Services Signature:  Date: 9/15/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET # 20080051	MASTER ASSET		DESCRIPTION		DELL OPTIPLEX 755			
	ADD'L DESC		BRCN6G1					
CLASS	40	MACHINERY & EQU	FUND SOURCE	01	MAINT CONT	Y	INSURED	N
SUBCL	116	COMPUTER	ACQUIS METH	A1 PURCHASE	VENDOR DESC	Vendor Name Mi	CARRIER	
COMMODITY			ACQUIS DATE	06/06/2008	TYPE	G	INSURED VAL	0.00
DEPT	0141	COUNTY ATTORNEY	ACQUIS COST	773.11	EXPIRE DATE		EXPIRE DATE	
LOC CODE	230	COUNTY ATTORNEY	ACRES	0.000	ANNUAL COST	0.00	POLICY CST	0.00
LOC MEMO			QTY	1	MEMO		MEMO	
ROOM			UNIT PRICE	0.00				
STORAGE LOC			PURCH MEMO	01141514-564000				
STATUS	A	ACTIVE			DEPRECIATE	Y		
CONDITION	E	EXCELLENT	SOY BOOK	0.00	DEPREC PRIN		773.11	
CUSTODIAN	COUNTY ATTORNEY		CURRENT BOOK	0.00	FIRST YR/PR	2008/09	LAST YR/PR	2011/08
TITLEHOLDER			EST SALVAGE	0.00	EST LIFE	3		
			REPL COST	773.11	PERIODS TAKEN	36		
TAG #	05877		LAST INVENT	06/12/2009	ACCUM DEPREC		773.11	
SERIAL #	BRCN6G1		IMPROVE MEMO					
MANUFACTURER	DELL	DELL						
MODEL			RETIRE DATE					
MODEL YEAR			DISP CODE					
LICENSE #			DISP PRICE	0.00				
			SALE PRICE	0.00				
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT			

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98000	277101		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-123

DEPARTMENT: County Attorney

TO BE COMPLETED BY DEPARTMENT:

Property Number: 5618 Mileage / Hours if applicable:

Year/Description: Dell Optiplex 745

Serial/Vin Number: C95YND1 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

Outdated Computer

RECEIVED 2020 SEP 15 AM 8:04

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: XX Indicate how and by whom: IT Department - Recycle E-Scrap

Auction: Where: Amount Received:

Other: Please describe:

Department Head Signature: Date:

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20070304 Acquisition Cost: \$1,055.40

Acquisition Date: 09/30/2007 Book Value: -0-

Financial Services Signature: Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

ASSET # 20070304	MASTER ASSET	DESCRIPTION	DELL OPTIPLEX 745 COMPUTER	
	ADD'L DESC	DELL 17" MONITOR, LX300	WIRELESS KEYBOARD, MOUSE	
CLASS 40	MACHINERY & EQU	FUND SOURCE 01		
SUBCL 116	COMPUTER	ACQUIS METH A1 PURCHASE	MAINT CONT Y	INSURED N
COMMODITY			VENDOR DESC Vendor Name Mi	CARRIER
DEPT 0141	COUNTY ATTORNEY	ACQUIS DATE 09/30/2007	TYPE G	INSURED VAL 0.00
LOC CODE 230	COUNTY ATTORNEY	ACQUIS COST 1,055.40	EXPIRE DATE	EXPIRE DATE
LOC MEMO	ACRES	0.000	ANNUAL COST 0.00	POLICY CST 0.00
ROOM	QTY 1		MEMO	MEMO
STORAGE LOC	UNIT PRICE 0.00			
	PURCH MEMO	DELL 01141514-564000		
STATUS A	ACTIVE			
CONDITION E	EXCELLENT	SOY BOOK 0.00	DEPRECIATE Y	
CUSTODIAN	COUNTY ATTORNEY	CURRENT BOOK 0.00	DEPREC PRIN 1,055.40	
TITLEHOLDER		EST SALVAGE 0.00	FIRST YR/PR 2007/12	LAST YR/PR 2010/11
		REPL COST 1,055.40	EST LIFE 3	
TAG # 5618		LAST INVENT 06/12/2009	PERIODS TAKEN 36	
SERIAL # C95YND1		IMPROVE MEMO	ACCUM DEPREC 1,055.40	
MANUFACTURER	DELL DELL			
MODEL	OPTIPLEX 745	RETIRE DATE		
MODEL YEAR		DISP CODE		
LICENSE #		DISP PRICE 0.00		
		SALE PRICE 0.00		

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
3618	7000842	3420	XC633P924	09/30/2007	996.40
3618	7000842	3441	XC6192D25	09/30/2007	59.00

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98000	277101		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-124

DEPARTMENT: NASSAU COUNTY PROPERTY APPRAISER OFFICE

TO BE COMPLETED BY DEPARTMENT:

Property Number: 0241 Mileage / Hours if applicable: _____

Year/Description: OFFICE FURNITURE DESK WITH 2 DRAWERS, FREE STANDING 2 DRAWER

Serial/Vin Number: _____ Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

END OF LIFE - DAMAGED

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: X Indicate how and by whom: SCRAP

Auction: _____ Where: _____ Amount Received: _____

Other: _____ Please describe: _____

Department Head Signature:  Date: 9/2/2020

2020 SEP -4 AM 9:06 RECEIVED
NASSAU COUNTY PROPERTY APPRAISER OFFICE

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20030041 Acquisition Cost: \$2,163.48

Acquisition Date: 09/30/2002 Book Value: -0-

Financial Services Signature:  Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date: _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET # 20030041	MASTER ASSET	DESCRIPTION	OFFICE FURNITURE
	ADD'L DESC	DESK WITH 2 DRAWERS; FREE STANDING 2 DRAWER (SERVICE STATION)	
CLASS 40	MACHINERY & EQU	FUND SOURCE 01	
SUBCL 200	OFFICE FURNITUR	ACQUIS METH A1 PURCHASE	MAINT CONT N INSURED N
COMMODITY		VENDOR DESC	Vendor Name Mi CARRIER
DEPT 0041	PROPERTY APPRAI	ACQUIS DATE 09/30/2002	TYPE G INSURED VAL 0.00
LOC CODE 428	PROPERTY APPR	ACQUIS COST 2,163.48	EXPIRE DATE
LOC MEMO	ACRES 0.000	ANNUAL COST	0.00 POLICY CST 0.00
ROOM	QTY	MEMO	MEMO
STORAGE LOC	UNIT PRICE 0.00	PURCH MEMO	OFFICE ENVIRONMENTS 01
STATUS	A ACTIVE		
CONDITION	E EXCELLENT	SOY BOOK 0.00	DEPRECIATE Y
CUSTODIAN	DEPARTMENT HEAD	CURRENT BOOK 0.00	DEPREC PRIN 2,163.48
TITLEHOLDER		EST SALVAGE 0.00	FIRST YR/PR 2002/12 LAST YR/PR 2012/11
		REPL COST 0.00	EST LIFE 10
TAG # 0241		LAST INVENT 08/19/2009	PERIODS TAKEN 120
SERIAL #		IMPROVE MEMO	ACCUM DEPREC 2,163.48
MANUFACTURER			
MODEL		RETIRE DATE	
MODEL YEAR		DISP CODE	
LICENSE #		DISP PRICE	
		SALE PRICE 0.00	

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
		26729			4,766.86
		27427			296.42

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98000	277101		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-125

DEPARTMENT: NASSAU COUNTY PROPERTY APPRAISER OFFICE

TO BE COMPLETED BY DEPARTMENT:

Property Number: 0242 Mileage / Hours if applicable: _____

Year/Description: OFFICE FURNITURE DESK WITH EXTENSION, 2 DRAWERS IN DESK FREE STANDING

Serial/Vin Number: _____ Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

END OF LIFE - DAMAGED

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: X Indicate how and by whom: SCRAP

Auction: _____ Where: _____ Amount Received: _____

Other: _____ Please describe: _____

Department Head Signature: [Signature] Date: 9/2/2020

RECEIVED
2020 SEP -4 AM 9:09
NASSAU COUNTY PROPERTY APPRAISER OFFICE

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20030042 Acquisition Cost: \$2,163.48

Acquisition Date: 09/30/2002 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date: _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET # 20030042		MASTER ASSET		DESCRIPTION OFFICE FURNITURE	
		ADD'L DESC	DESK W/EXTENSION, 2 DRAWERS IN DESK,	FREE STANDING 2 DRAWER	
			(SERVICE STATION)		
CLASS	40	MACHINERY & EQU	FUND SOURCE	01	
SUBCL	200	OFFICE FURNITUR	ACQUIS METH	A1 PURCHASE	MAINT CONT N
COMMODITY					INSURED N
DEPT	0041	PROPERTY APPRAI	ACQUIS DATE	09/30/2002	VENDOR DESC Vendor Name Mi
LOC CODE	428	PROPERTY APPR	ACQUIS COST	2,163.48	CARRIER
LOC MEMO			ACRES	0.000	INSURED VAL
ROOM			QTY		EXPIRE DATE
STORAGE LOC			UNIT PRICE	0.00	ANNUAL COST 0.00
			PURCH MEMO	OFFICE ENVIRONMENTS 01	POLICY CST
STATUS	A	ACTIVE			MEMO
CONDITION	E	EXCELLENT	SOY BOOK	0.00	
CUSTODIAN	DEPT HEAD		CURRENT BOOK	0.00	DEPRECIATE Y
TITLEHOLDER			EST SALVAGE	0.00	DEPREC PRIN 2,163.48
			REPL COST	0.00	FIRST YR/PR 2002/12
TAG #	0242		LAST INVENT	08/19/2009	LAST YR/PR 2012/11
SERIAL #			IMPROVE MEMO		EST LIFE 10
MANUFACTURER					PERIODS TAKEN 120
MODEL			RETIRE DATE		ACCUM DEPREC 2,163.48
MODEL YEAR			DISP CODE		
LICENSE #			DISP PRICE		
			SALE PRICE	0.00	
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
		274727			296.42
		26729			4,766.86

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98000	277101		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-126

DEPARTMENT: NASSAU COUNTY PROPERTY APPRAISER OFFICE

TO BE COMPLETED BY DEPARTMENT:

Property Number: 0243 Mileage / Hours if applicable:

Year/Description: OFFICE FURNITURE DESK WITH COUNTER

Serial/Vin Number: Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

END OF LIFE - DAMAGED

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: X Indicate how and by whom: SCRAP

Auction: Where: Amount Received:

Other: Please describe:

Department Head Signature: [Signature] Date: 9/2/2020

RECEIVED 2020 SEP -4 AM 9:07

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20030040 Acquisition Cost: \$897.09

Acquisition Date: 09/30/2002 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date:

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

ASSET # 20030040	MASTER ASSET	DESCRIPTION	OFFICE FURNITURE
	ADD'L DESC	DESK W/COUNTER (FRONT DESK-PUBLIC ACCESS)	
CLASS 40	MACHINERY & EQU	FUND SOURCE 01	
SUBCL 200	OFFICE FURNITUR	ACQUIS METH A1 PURCHASE	MAINT CONT N INSURED N
COMMODITY			VENDOR DESC Vendor Name Mi CARRIER
DEPT 0041	PROPERTY APPRAI	ACQUIS DATE 09/30/2002	TYPE G INSURED VAL 0.00
LOC CODE 428	PROPERTY APPR	ACQUIS COST 897.09	EXPIRE DATE EXPIRE DATE
LOC MEMO PUBLIC ACCESS	ACRES 0.000		ANNUAL COST 0.00 POLICY CST 0.00
ROOM	QTY		MEMO MEMO
STORAGE LOC	UNIT PRICE 0.00		
	PURCH MEMO OFFICE ENVIRONMENTS 0		
STATUS A	ACTIVE		
CONDITION E	EXCELLENT	SOY BOOK 0.00	DEPRECIATE Y
CUSTODIAN DEPARTMENT HEAD	CURRENT BOOK 0.00		DEPREC PRIN 897.09
TITLEHOLDER	EST SALVAGE 0.00		FIRST YR/PR 2002/12 LAST YR/PR 2012/11
	REPL COST 0.00		EST LIFE 10
TAG # 0243	LAST INVENT 08/19/2009		PERIODS TAKEN 120
SERIAL #	IMPROVE MEMO		ACCUM DEPREC 897.09
MANUFACTURER			
MODEL	RETIRE DATE		
MODEL YEAR	DISP CODE		
LICENSE #	DISP PRICE		
	SALE PRICE 0.00		

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
		26729			4,766.86
		27567			160.77

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98000	277101		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-127

DEPARTMENT: NASSAU COUNTY PROPERTY APPRAISER OFFICE

TO BE COMPLETED BY DEPARTMENT:

Property Number: 06640 Mileage / Hours if applicable: _____

Year/Description: COMPUTER - DELL POWER EDGE R710

Serial/Vin Number: D552WN1 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

END OF LIFE - RETIRED

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: X Indicate how and by whom: SCRAP TO BE RETAINED BY COUNTY

Auction: _____ Where: _____ Amount Received: _____

Other: _____ Please describe: _____

Department Head Signature:  Date: 9/2/2020

RECEIVED
2020 SEP -4 AM 9:06
CLERK'S
PROPERTY SERVICES
NASSAU COUNTY, FL

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20101287 Acquisition Cost: \$5,341.29

Acquisition Date: 09/08/2010 Book Value: -0-

Financial Services Signature:  Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date: _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET #	20101287	MASTER ASSET			DESCRIPTION	COMPUTER-DELL POWER EDGE R710		
CLASS	40	MACHINERY & EQU	FUND SOURCE	01				
SUBCL	116	COMPUTER	ACQUIS METH	A1	PURCHASE			
COMMODITY					MAINT CONT	Y	INSURED	N
DEPT	0041	PROPERTY APPRAI	ACQUIS DATE	09/08/2010	VENDOR DESC	Vendor Name Mi	CARRIER	
LOC CODE	428	PROPERTY APPR	ACQUIS COST	5,341.29	TYPE	G	INSURED VAL	0.00
LOC MEMO			ACRES	0.000	EXPIRE DATE		EXPIRE DATE	
ROOM			QTY	1	ANNUAL COST	0.00	POLICY CST	0.00
STORAGE LOC			UNIT PRICE	0.00	MEMO		MEMO	
			PURCH MEMO	DELL				
STATUS	A	ACTIVE			DEPRECIATE	Y		
CONDITION	E	EXCELLENT	SOY BOOK	0.00	DEPREC PRIN	5,341.29		
CUSTODIAN	PROPERTY APPRAISER		CURRENT BOOK	0.00	FIRST YR/PR	2010/12	LAST YR/PR	2013/11
TITLEHOLDER			EST SALVAGE	0.00	EST LIFE	3		
			REPL COST	5,341.29	PERIODS TAKEN	36		
TAG #	06640		LAST INVENT		ACCUM DEPREC	5,341.29		
SERIAL #	D552WN1		IMPROVE MEMO					
MANUFACTURER	DELL	DELL						
MODEL	R710		RETIRE DATE					
MODEL YEAR	2010		DISP CODE					
LICENSE #			DISP PRICE	0.00				
			SALE PRICE	0.00				

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98051	564000		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-128

DEPARTMENT: NASSAU COUNTY PROPERTY APPRAISER OFFICE

TO BE COMPLETED BY DEPARTMENT:

Property Number: 07598 Mileage / Hours if applicable: _____

Year/Description: COMPUTER DELL PRECISION T1700

Serial/Vin Number: JRDWK02 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

END OF LIFE

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: X Indicate how and by whom: SCRAP TO BE RETAINED BY COUNTY

Auction: _____ Where: _____ Amount Received: _____

Other: _____ Please describe: _____

Department Head Signature:  Date: 9/2/2020

RECEIVED
2020 SEP -4 AM 9:07
NASSAU COUNTY PROPERTY APPRAISER OFFICE

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20140062 Acquisition Cost: \$1,379.32

Acquisition Date: 05/28/2014 Book Value: -0-

Financial Services Signature:  Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date: _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET # 20140062	MASTER ASSET	DESCRIPTION	DELL PRECISION T1700		
CLASS 40 MACHINERY & EQU	FUND SOURCE 01	MAINT CONT	Y INSURED N		
SUBCL 116 COMPUTER	ACQUIS METH A1 PURCHASE	VENDOR DESC	Vendor Name Mi CARRIER		
COMMODITY		TYPE	G INSURED VAL 0.00		
DEPT 0041 PROPERTY APPRAI	ACQUIS DATE 05/28/2014	EXP. DATE	EXP. DATE		
LOC CODE 428 PROPERTY APPR	ACQUIS COST 1,379.32	ANNUAL COST	0.00 POLICY CST 0.00		
LOC MEMO	ACRES 0.000	MEMO	MEMO		
ROOM	QTY 1				
STORAGE LOC	UNIT PRICE 0.00				
	PURCH MEMO 18061513-564000 DELL				
STATUS A ACTIVE		DEPRECIATE	Y		
CONDITION E EXCELLENT	SOY BOOK 0.06	DEPREC PRIN	1,379.32		
CUSTODIAN DEPT HEAD	CURRENT BOOK 0.06	FIRST YR/PR	2014/08 LAST YR/PR 2017/07		
TITLEHOLDER	EST SALVAGE 0.00	EST LIFE	3		
	REPL COST 1,379.32	PERIODS TAKEN	36		
TAG # 07598	LAST INVENT	ACCUM DEPREC	1,379.32		
SERIAL # JRDWK02	IMPROVE MEMO				
MANUFACTURER DELL DELL					
MODEL PRECISION T1700	RETIRE DATE				
MODEL YEAR	DISP CODE				
LICENSE #	DISP PRICE 0.00				
	SALE PRICE 0.00				
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98051	564000		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-129

DEPARTMENT: Animal Control

TO BE COMPLETED BY DEPARTMENT:

Property Number: 7789 Mileage / Hours if applicable: N/A

Year/Description: Computer Dell 8T2TQ22 Optiplex 7010

Serial/Vin Number: 8T2TQ22 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

This computer has been replaced by I.T. Department.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: _____ Indicate how and by whom: _____

Auction: _____ Where: _____ Amount Received: _____

Other: Please describe: Recycled by I.T. - Recycle E-Scrap

Department Head Signature: [Signature] Date: 9/2/20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20150016 Acquisition Cost: \$799.25

Acquisition Date: 01/21/2015 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET #	20150016	MASTER ASSET		DESCRIPTION	OPTIPLEX 7010
CLASS	40	MACHINERY & EQU	FUND SOURCE 01		
SUBCL	116	COMPUTER	ACQUIS METH A1	MAINT CONT	Y
COMMODITY			PURCHASE	INSURED	N
DEPT	0621	ANIMAL CONTROL	ACQUIS DATE 01/21/2015	VENDOR DESC	Vendor Name Mi
LOC CODE	800	ANIMAL CONTROL	ACQUIS COST 799.25	TYPE	G
LOC MEMO			ACRES 0.000	INSURED VAL	0.00
ROOM			QTY 1	EXPIRE DATE	
STORAGE LOC			UNIT PRICE 0.00	ANNUAL COST	0.00
			PURCH MEMO 04621562-564000	POLICY CST	0.00
			DELL	MEMO	
STATUS	A	ACTIVE			
CONDITION	E	EXCELLENT	SOY BOOK 0.00	DEPRECIATE	Y
CUSTODIAN	DEPT HEAD		CURRENT BOOK 0.00	DEPREC PRIN	799.25
TITLEHOLDER			EST SALVAGE 0.00	FIRST YR/PR	2015/04
			REPL COST 799.25	LAST YR/PR	2018/03
TAG #	07789		LAST INVENT	EST LIFE	3
SERIAL #	8T2TQ22		IMPROVE MEMO	PERIODS TAKEN	36
MANUFACTURER	DELL	DELL		ACCUM DEPREC	799.25
MODEL	OPTIPLEX 7010		RETIRE DATE		
MODEL YEAR			DISP CODE		
LICENSE #			DISP PRICE 0.00		
			SALE PRICE 0.00		

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98056	564000		100.00
5	DEPRECIATION EXPENSE	98056	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-130

DEPARTMENT: Animal Control

TO BE COMPLETED BY DEPARTMENT:

Property Number: 8346 Mileage / Hours if applicable: N/A

Year/Description: Computer Dell 8T2TQ22 Optiplex 7010

Serial/Vin Number: G4JF842 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

This computer has been replaced by I.T. Department.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: _____ Indicate how and by whom: _____

Auction: _____ Where: _____ Amount Received: _____

Other: Please describe: Recycled by I.T. E-Scrap

Department Head Signature:  Date: 09/02/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20150041 Acquisition Cost: \$799.00

Acquisition Date: 03/13/2015 Book Value: -0-

Financial Services Signature:  Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET #	20150041	MASTER ASSET		DESCRIPTION	OPTIPLEX 7010				
CLASS	40	MACHINERY & EQU	FUND SOURCE	01					
SUBCL	116	COMPUTER	ACQUIS METH	A1	PURCHASE	MAINT CONT	Y	INSURED	N
COMMODITY						VENDOR DESC	Vendor Name Mi	CARRIER	
DEPT	0621	ANIMAL CONTROL	ACQUIS DATE		03/13/2015	TYPE	G	INSURED VAL	0.00
LOC CODE	800	ANIMAL CONTROL	ACQUIS COST		799.00	EXPIRE DATE		EXPIRE DATE	
LOC MEMO			ACRES		0.000	ANNUAL COST	0.00	POLICY CST	0.00
ROOM			QTY	1		MEMO		MEMO	
STORAGE LOC			UNIT PRICE		0.00				
			PURCH MEMO		04621562-564000	DELL			
STATUS	A	ACTIVE							
CONDITION	E	EXCELLENT	SOY BOOK		0.01	DEPRECIATE	Y		
CUSTODIAN	DEPT HEAD		CURRENT BOOK		0.01	DEPREC PRIN		799.00	
TITLEHOLDER			EST SALVAGE		0.00	FIRST YR/PR	2015/06	LAST YR/PR	2018/05
			REPL COST		799.00	EST LIFE	3		
TAG #	08346		LAST INVENT			PERIODS TAKEN	36		
SERIAL #	G4JF842		IMPROVE MEMO			ACCUM DEPREC		799.00	
MANUFACTURER	DELL	DELL							
MODEL	OPTIPLEX 7010		RETIRE DATE						
MODEL YEAR			DISP CODE						
LICENSE #			DISP PRICE		0.00				
			SALE PRICE		0.00				

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98051	564000		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI #2020-131

DEPARTMENT: Animal Control

TO BE COMPLETED BY DEPARTMENT:

Property Number: 8429 Mileage / Hours if applicable: N/A

Year/Description: Computer Dell 8T2TQ22 Optiplex 7010

Serial/Vin Number: CZPMD22 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

This computer has been replaced by I.T. Department.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: Indicate how and by whom:

Auction: Where: Amount Received:

Other: X Please describe: Recycled by I.T. - E-Scrap

Department Head Signature: [Signature] Date: 9/2/20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20150155 Acquisition Cost: \$799.00

Acquisition Date: 07/02/2015 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

ASSET # 20150155		MASTER ASSET		DESCRIPTION	DELL OPTIPLEX 7020	
CLASS 40	MACHINERY & EQU	FUND SOURCE 01		MAINT CONT	Y	INSURED N
SUBCL 116	COMPUTER	ACQUIS METH A1	PURCHASE	VENDOR DESC	Vendor Name Mi	CARRIER
COMMODITY				TYPE	G	INSURED VAL 0.00
DEPT 0621	ANIMAL CONTROL	ACQUIS DATE	07/02/2015	EXPIRE DATE		EXPIRE DATE
LOC CODE 800	ANIMAL CONTROL	ACQUIS COST	799.00	ANNUAL COST	0.00	POLICY CST 0.00
LOC MEMO		ACRES	0.000	MEMO		MEMO
ROOM		QTY	1			
STORAGE LOC		UNIT PRICE	0.00			
		PURCH MEMO	04621562-564000	DELL		
STATUS A	ACTIVE			DEPRECIATE	Y	
CONDITION E	EXCELLENT	SOY BOOK	0.00	DEPREC PRIN		799.00
CUSTODIAN	DEPT HEAD	CURRENT BOOK	0.00	FIRST YR/PR	2015/10	LAST YR/PR 2018/09
TITLEHOLDER		EST SALVAGE	0.00	EST LIFE	3	
		REPL COST	799.00	PERIODS TAKEN	36	
TAG # 08429		LAST INVENT		ACCUM DEPREC		799.00
SERIAL #	CZPMD22	IMPROVE MEMO				
MANUFACTURER	DELL DELL					
MODEL	OPTIPLEX 7020	RETIRE DATE				
MODEL YEAR		DISP CODE				
LICENSE #		DISP PRICE	0.00			
		SALE PRICE	0.00			

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98056	564000		100.00
5	DEPRECIATION EXPENSE	98056	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-132

DEPARTMENT: Animal Services

TO BE COMPLETED BY DEPARTMENT:

Property Number: 621 7858 Mileage / Hours if applicable:

Year/Description: APX 4000 Portable Radio

Serial/Vin Number: 426CQZ5528 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

Asstest affidavit was completed on 08/21/2019 for Missing - Lost - Stolen: Item is still missing.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: Indicate how and by whom:

Auction: Where: Amount Received:

Other: X Please describe: Missing

Department Head Signature: [Signature] Date: 09/24/2020

RECEIVED 2020 SEP 24 PM 4:35

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20150185 Acquisition Cost: \$3,603.93

Acquisition Date: 01/27/2015 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

ASSET # 20150185	MASTER ASSET	DESCRIPTION	APX 4000 PORTABLE RADIO		
CLASS 40 MACHINERY & EQU	FUND SOURCE 01	MAINT CONT	Y INSURED N		
SUBCL 406 RADIO	ACQUIS METH A1 PURCHASE	VENDOR DESC	Vendor Name Mi CARRIER		
COMMODITY		TYPE	G INSURED VAL 0.00		
DEPT 0621 ANIMAL CONTROL	ACQUIS DATE 01/27/2015	EXP. DATE	EXP. DATE		
LOC CODE 800 ANIMAL CONTROL	ACQUIS COST 3,603.93	ANNUAL COST	0.00 POLICY CST 0.00		
LOC MEMO	ACRES 0.000	MEMO	MEMO		
ROOM	QTY 1				
STORAGE LOC	UNIT PRICE 0.00				
	PURCH MEMO 01252525-564000-MCOM2				
STATUS A ACTIVE		DEPRECIATE	Y		
CONDITION E EXCELLENT	SOY BOOK 180.19	DEPREC PRIN	3,603.93		
CUSTODIAN DEPT HEAD	CURRENT BOOK 0.00	FIRST YR/PR	2015/04 LAST YR/PR 2020/03		
TITLEHOLDER	EST SALVAGE 0.00	EST LIFE	5		
	REPL COST 3,603.93	PERIODS TAKEN	60		
TAG # 07858	LAST INVENT	ACCUM DEPREC	3,603.93		
SERIAL # 426CQZ5528	IMPROVE MEMO				
MANUFACTURER MOTOR MOTOROLA					
MODEL APX 4000	RETIRE DATE				
MODEL YEAR	DISP CODE				
LICENSE #	DISP PRICE 0.00				
	SALE PRICE 0.00				
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98052	564000		100.00
5	DEPRECIATION EXPENSE	98052	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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Missing - Lost - Stolen Assets Affidavit

ASSET DESCRIPTION: APX 4000 Portable Radio

ASSET TAG: 621 7858

ASSET NUMBER: 20150185

Items not located during the inventory process shall be promptly reported to the governmental unit which shall cause a thorough investigation to be made. If the investigation determines that the item was stolen, the individual property record shall be noted, and a report with the appropriate law enforcement agency describing the missing item and the circumstances surrounding its disappearance.

(Chapter 69I-73.006 (6)(b) Florida Administrative Code: Tangible Personal Property Owned by Local Governments)

Check one of the following:

MISSING OR LOST

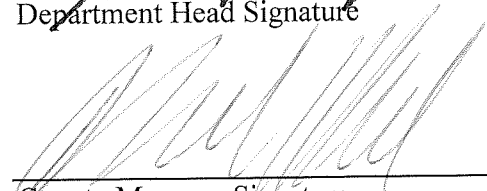
STOLEN
(Attach law enforcement report)

Explanation:

Unable to locate radio during the inventory process this was an additional radio that the past shelter manager MJ Manning had possession of.


Department Head Signature

08/21/2019
Date


County Manager Signature

11/23/19
Date

Received by Finance:

RL 11/23/19
Initial & Date

ASSET # 20150185	MASTER ASSET	DESCRIPTION	APX 4000 PORTABLE RADIO
CLASS 40 MACHINERY & EQU	FUND SOURCE 01	MAINT CONT	Y INSURED N
SUBCL 406 RADIO	ACQUIS METH A1 PURCHASE	VENDOR DESC	Vendor Name Mi CARRIER
COMMODITY		TYPE	G INSURED VAL 0.00
DEPT 0621 ANIMAL CONTROL	ACQUIS DATE 01/27/2015	EXPIRE DATE	EXPIRE DATE
LOC CODE 800 ANIMAL CONTROL	ACQUIS COST 3,603.93	ANNUAL COST	0.00 POLICY CST 0.00
LOC MEMO	ACRES 0.000	MEMO	MEMO
ROOM	QTY 1		
STORAGE LOC	UNIT PRICE 0.00		
	PURCH MEMO 01252525-564000-MCOM2		
STATUS A ACTIVE		DEPRECIATE	Y
CONDITION E EXCELLENT	SOY BOOK 900.97	DEPREC PRIN	3,603.93
CUSTODIAN DEPT HEAD	CURRENT BOOK 300.32	FIRST YR/PR	2015/04 LAST YR/PR 2019/10
TITLEHOLDER	EST SALVAGE 0.00	EST LIFE	5
	REPL COST 3,603.93	PERIODS TAKEN	55
TAG # 07858	LAST INVENT	ACCUM DEPREC	3,303.61
SERIAL # 426CQZ5528	IMPROVE MEMO		
MANUFACTURER MOTOR MOTOROLA			
MODEL APX 4000	RETIRE DATE		
MODEL YEAR	DISP CODE		
LICENSE #	DISP PRICE 0.00		
	SALE PRICE 0.00		

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98052	564000		100.00
5	DEPRECIATION EXPENSE	98052	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-133

DEPARTMENT: Animal Services

TO BE COMPLETED BY DEPARTMENT:

Property Number: 6216 Mileage / Hours if applicable:

Year/Description: Motorola Portable Radio

Serial/Vin Number: 205CHT1795 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

Assest affidavit was completed on 08/23/2018 for Missing - Lost - Stolen: Item is still missing.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: Indicate how and by whom:

Auction: Where: Amount Received:

Other: X Please describe: Missing

Department Head Signature: [Signature] Date: 09/24/2020

RECEIVED 2020 SEP 24 PM 4:34 ALACHUA COUNTY

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20090084 Acquisition Cost: \$1,301.93

Acquisition Date: 06/01/2009 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

ASSET # 20090084	MASTER ASSET	DESCRIPTION	MOTOROLA PORTABLE RADIO
	ADD'L DESC SN 205CHT1795		
CLASS 40 MACHINERY & EQU	FUND SOURCE 07	MAINT CONT Y	INSURED N
SUBCL 406 RADIO	ACQUIS METH A4 OTHER	VENDOR DESC Vendor Name Mi	CARRIER
COMMODITY		TYPE G	INSURED VAL 0.00
DEPT 0621 ANIMAL CONTROL	ACQUIS DATE 06/01/2009	EXPIRE DATE	EXPIRE DATE
LOC CODE 800 ANIMAL CONTROL	ACQUIS COST 1,301.93	ANNUAL COST 0.00	POLICY CST 0.00
LOC MEMO	ACRES 0.000	MEMO	MEMO
ROOM	QTY 1		
STORAGE LOC	UNIT PRICE 0.00		
	PURCH MEMO TRANSFER FROM SHERIFF		
STATUS A ACTIVE		DEPRECIATE Y	
CONDITION E EXCELLENT	SOY BOOK 0.00	DEPREC PRIN 1,301.93	
CUSTODIAN DEPT HEAD	CURRENT BOOK 0.00	FIRST YR/PR 2009/09	LAST YR/PR 2012/08
TITLEHOLDER	EST SALVAGE 0.00	EST LIFE 3	
	REPL COST 1,301.93	PERIODS TAKEN 36	
TAG # 06216	LAST INVENT	ACCUM DEPREC 1,301.93	
SERIAL # 205CHT1795	IMPROVE MEMO		
MANUFACTURER			
MODEL	RETIRE DATE		
MODEL YEAR	DISP CODE		
LICENSE #	DISP PRICE 0.00		
	SALE PRICE 0.00		
VEND #	PO #	DOCUMENT #	INVOICE #
			INV DATE
			INV AMT

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98051	564000		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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Missing - Lost - Stolen Assets Affidavit

ASSET DESCRIPTION: Motorola Portable Radio

ASSET TAG: 6216

ASSET NUMBER: 20090084

Items not located during the inventory process shall be promptly reported to the governmental unit which shall cause a thorough investigation to be made. If the investigation determines that the item was stolen, the individual property record shall be noted, and a report with the appropriate law enforcement agency describing the missing item and the circumstances surrounding its disappearance.

(Chapter 69I-73.006 (6)(b) Florida Administrative Code: Tangible Personal Property Owned by Local Governments

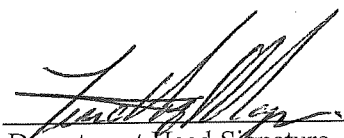
Check one of the following:

MISSING OR LOST

STOLEN
(Attach law enforcement report)

Explanation:

Unable to locate old Motorola radio that was used by past Animal Control Officers. This radio is being
deleted from inventory due to being outdated and have been replaced.


Department Head Signature

08/23/2018
Date


County Manager Signature

9/14/18
Date

Received by Finance:

RL 9/26/18
Initial & Date

ASSET # 20090084	MASTER ASSET	DESCRIPTION	MOTOROLA PORTABLE RADIO		
	ADD'L DESC SN 205CHT1795				
CLASS 40	MACHINERY & EQU FUND SOURCE 07				
SUBCL 406	RADIO ACQUIS METH A4 OTHER	MAINT CONT Y	INSURED N		
COMMODITY		VENDOR DESC Vendor Name Mi	CARRIER		
DEPT 0621	ANIMAL CONTROL ACQUIS DATE 06/01/2009	TYPE G	INSURED VAL 0.00		
LOC CODE 800	ANIMAL CONTROL ACQUIS COST 1,301.93	EXPIRE DATE	EXPIRE DATE		
LOC MEMO	ACRES 0.000	ANNUAL COST 0.00	POLICY CST 0.00		
ROOM	QTY 1	MEMO	MEMO		
STORAGE LOC	UNIT PRICE 0.00				
	PURCH MEMO TRANSFER FROM SHERIFF				
STATUS A	ACTIVE				
CONDITION E	EXCELLENT	DEPRECIATE Y			
CUSTODIAN DEPT HEAD		DEPREC PRIN 1,301.93			
TITLEHOLDER		FIRST YR/PR 2009/09	LAST YR/PR 2012/08		
		EST SALVAGE 0.00			
		REPL COST 1,301.93			
TAG # 06216	LAST INVENT	EST LIFE 3			
SERIAL # 205CHT1795	IMPROVE MEMO	PERIODS TAKEN 36			
MANUFACTURER		ACCUM DEPREC 1,301.93			
MODEL	RETIRE DATE				
MODEL YEAR	DISP CODE				
LICENSE #	DISP PRICE 0.00				
	SALE PRICE 0.00				
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT

G/L Accounts

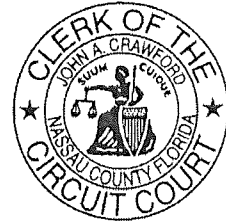
TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98051	564000		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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John A. Crawford
Clerk of the Circuit Court
Nassau County



MEMORANDUM

To: Mike Mullin, County Manager

From: Kari Ulmer, Clerk Financial Services

Date: 09/12/18

Re: Missing-Lost Asset

Please approve the attached Missing-Lost-Stolen Asset Affidavit and forward it back to Financial Services.

Thank you

RCVD COUNTY MGR
12 SEP '18 PM 4:56

2018 SEP 17 PM 2:07

2018 SEP 17 PM 2:07

DELETION FROM INVENTORY FORM

DI # 2020-134

DEPARTMENT: VETERAN SERVICES

TO BE COMPLETED BY DEPARTMENT:

Property Number: TAG 3533 Mileage / Hours if applicable: NA

Year/Description: RICOHA FAX MACHINE

Serial/Vin Number: 3559400494 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

FAX MACHINE RETURNED TO IT DEPARTMENT

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: Indicate how and by whom:

Auction: Where: Amount Received:

Other: X Please describe: RETURNED TO IT DEPARTMENT TO BE RECYCLED - E-Scrap

Department Head Signature: [Signature] Date: 9/4/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20060265 Acquisition Cost: \$773.00

Acquisition Date: 12/29/2005 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date:

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

09/25/2020 11:06
6235kulm

BOARD OF COMMISSIONERS
FIXED ASSET WORKSHEET

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famstmnt

ASSET #	20060265	MASTER ASSET			DESCRIPTION	RICOH 3310LE FAX MACHINE				
CLASS	40	MACHINERY & EQU	FUND SOURCE	01						
SUBCL	118	FAX MACHINE	ACQUIS METH	A1	PURCHASE	MAINT CONT	Y	INSURED	N	
COMMODITY						VENDOR DESC	Vendor Name Mi	CARRIER		
DEPT	0021	CLERK OF COURTS	ACQUIS DATE		12/29/2005	TYPE	G	INSURED VAL		0.00
LOC CODE	359	VETERANS AFFAIR	ACQUIS COST		773.00	EXPIRE DATE		EXPIRE DATE		
LOC MEMO			ACRES		0.000	ANNUAL COST		0.00	POLICY CST	0.00
ROOM			QTY	1		MEMO			MEMO	
STORAGE LOC			UNIT PRICE		0.00					
			PURCH MEMO		RICOH					
STATUS	A	ACTIVE								
CONDITION	E	EXCELLENT	SOY BOOK		0.00	DEPRECIATE	Y			
CUSTODIAN	JOHN A CRAWFORD		CURRENT BOOK		0.00	DEPREC PRIN		773.00		
TITLEHOLDER			EST SALVAGE		0.00	FIRST YR/PR	2006/03	LAST YR/PR		2011/02
			REPL COST		773.00	EST LIFE	5			
TAG #	3533		LAST INVENT		07/16/2009	PERIODS TAKEN	60			
SERIAL #	A3559400494		IMPROVE MEMO			ACCUM DEPREC		773.00		
MANUFACTURER	RICOH RICOH									
MODEL	3310LE		RETIRE DATE							
MODEL YEAR			DISP CODE							
LICENSE #			DISP PRICE		0.00					
			SALE PRICE		0.00					
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT					
		500116132			773.00					

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98000	277101		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-135

DEPARTMENT: Building

TO BE COMPLETED BY DEPARTMENT:

Property Number: 8835 Mileage / Hours if applicable: _____

Year/Description: 5040 Dell Optiplex computer 2016

Serial/Vin Number: CJH5V62 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

Reached end of life - equipment obsolete

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: N/A

Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: X Indicate how and by whom: to be sold for recycling.- E-Scrap

Auction: _____ Where: _____ Amount Received: _____

Other: _____ Please describe: _____

Department Head Signature:  Date: 9/14/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20160175 Acquisition Cost: \$852.83

Acquisition Date: 05/13/2016 Book Value: -0-

Financial Services Signature:  Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date: _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET # 20160175	MASTER ASSET		DESCRIPTION		DELL OPTIPLEX 5040	
CLASS 40	MACHINERY & EQU	FUND SOURCE 01		MAINT CONT	Y	INSURED N
SUBCL 116	COMPUTER	ACQUIS METH A1	PURCHASE	VENDOR DESC	Vendor Name Mi	CARRIER
COMMODITY				TYPE	G	INSURED VAL 0.00
DEPT 0246	BUILDING DEPART	ACQUIS DATE	05/13/2016	EXPIRE DATE		EXPIRE DATE
LOC CODE 344	BUILDING DEPT	ACQUIS COST	852.83	ANNUAL COST	0.00	POLICY CST 0.00
LOC MEMO		ACRES	0.000	MEMO		MEMO
ROOM		QTY	1			
STORAGE LOC		UNIT PRICE	0.00			
		PURCH MEMO	45249515-564000	DELL		
STATUS A	ACTIVE			DEPRECIATE	Y	
CONDITION E	EXCELLENT	SOY BOOK	0.00	DEPREC PRIN		852.83
CUSTODIAN	DEPT HEAD	CURRENT BOOK	0.00	FIRST YR/PR	2016/08	LAST YR/PR 2019/07
TITLEHOLDER		EST SALVAGE	0.00	EST LIFE	3	
		REPL COST	852.83	PERIODS TAKEN	36	
TAG # 08835		LAST INVENT		ACCUM DEPREC		852.83
SERIAL #	CJH5V62	IMPROVE MEMO				
MANUFACTURER	DELL DELL					
MODEL	OPTIPLEX 5040	RETIRE DATE				
MODEL YEAR		DISP CODE				
LICENSE #		DISP PRICE	0.00			
		SALE PRICE	0.00			

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98051	564000		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-136

DEPARTMENT: Building

TO BE COMPLETED BY DEPARTMENT:

Property Number: 8970 Mileage / Hours if applicable: _____

Year/Description: 5040 Dell Optiplex computer 2016

Serial/Vin Number: BCTL8C2 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

Reached end of life - equipment obsolete

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: N/A

Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: X Indicate how and by whom: to be sold for recycling. -E-Scrap

Auction: _____ Where: _____ Amount Received: _____

Other: _____ Please describe: _____

Department Head Signature: [Signature] Date: 9/14/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20160244 Acquisition Cost: \$836.84

Acquisition Date: 08/12/2016 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date: _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

09/25/2020 11:06
6235kulm

|BOARD OF COMMISSIONERS
|FIXED ASSET WORKSHEET

|P 1
|famstmnt

ASSET # 20160244		MASTER ASSET			DESCRIPTION	DELL OPTIPLEX 5040			
CLASS	40	MACHINERY & EQU	FUND SOURCE	01					
SUBCL	116	COMPUTER	ACQUIS METH	A1	PURCHASE				
COMMODITY					MAINT CONT	Y	INSURED	N	
DEPT	0246	BUILDING DEPART	ACQUIS DATE		08/12/2016				
LOC CODE	344	BUILDING DEPT	ACQUIS COST		836.84				
LOC MEMO			ACRES		0.000				
ROOM			QTY	1					
STORAGE LOC			UNIT PRICE		0.00				
			PURCH MEMO		45245524-564000	DELL			
STATUS	A	ACTIVE							
CONDITION	E	EXCELLENT	SOY BOOK		0.00	DEPRECIATE	Y		
CUSTODIAN	DEPT HEAD		CURRENT BOOK		0.00	DEPREC PRIN		836.84	
TITLEHOLDER			EST SALVAGE		0.00	FIRST YR/PR	2016/11	LAST YR/PR	2019/10
			REPL COST		836.84	EST LIFE	3		
TAG #	08970		LAST INVENT			PERIODS TAKEN	36		
SERIAL #	BCTL8C2		IMPROVE MEMO			ACCUM DEPREC		836.84	
MANUFACTURER	DELL	DELL							
MODEL	OPTIPLEX 5040		RETIRE DATE						
MODEL YEAR			DISP CODE						
LICENSE #			DISP PRICE		0.00				
			SALE PRICE		0.00				
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT				

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98052	564000		100.00
5	DEPRECIATION EXPENSE	98052	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-137

DEPARTMENT: Building

TO BE COMPLETED BY DEPARTMENT:

Property Number: 8990 Mileage / Hours if applicable: _____

Year/Description: 5040 Dell Optiplex computer 2016

Serial/Vin Number: FPSTP52 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

Reached end of life - equipment obsolete

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: N/A

Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: X Indicate how and by whom: to be sold for recycling - E-Scrap

Auction: _____ Where: _____ Amount Received: _____

Other: _____ Please describe: _____

Department Head Signature: [Signature] Date: 9/14/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20160260 Acquisition Cost: \$836.84

Acquisition Date: 09/23/2016 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date: _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

09/25/2020 11:06
6235kulm

BOARD OF COMMISSIONERS
FIXED ASSET WORKSHEET

P 1
famstmnt

ASSET #	20160260	MASTER ASSET			DESCRIPTION	DELL OPTIPLEX 5040		
CLASS	40	MACHINERY & EQU	FUND SOURCE	01	MAINT CONT	Y	INSURED	N
SUBCL	116	COMPUTER	ACQUIS METH	A1	PURCHASE			
COMMODITY					VENDOR DESC	Vendor Name Mi	CARRIER	
DEPT	0246	BUILDING DEPART	ACQUIS DATE	09/23/2016	TYPE	G	INSURED VAL	0.00
LOC CODE	344	BUILDING DEPT	ACQUIS COST	836.84	EXPIRE DATE		EXPIRE DATE	
LOC MEMO			ACRES	0.000	ANNUAL COST	0.00	POLICY CST	0.00
ROOM			QTY	1	MEMO		MEMO	
STORAGE LOC			UNIT PRICE	0.00				
			PURCH MEMO	45246515-564000	DELL			
STATUS	A	ACTIVE			DEPRECIATE	Y		
CONDITION	E	EXCELLENT	SOY BOOK	0.00	DEPREC PRIN		836.84	
CUSTODIAN	DEPT HEAD		CURRENT BOOK	0.00	FIRST YR/PR	2016/12	LAST YR/PR	2019/11
TITLEHOLDER			EST SALVAGE	0.00	EST LIFE	3		
			REPL COST	836.84	PERIODS TAKEN	36		
TAG #	08990		LAST INVENT		ACCUM DEPREC		836.84	
SERIAL #	FPSTP52		IMPROVE MEMO					
MANUFACTURER	DELL	DELL						
MODEL	OPTIPLEX 5040		RETIRE DATE					
MODEL YEAR			DISP CODE					
LICENSE #			DISP PRICE	0.00				
			SALE PRICE	0.00				
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT			

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98051	564000		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-138

DEPARTMENT: Building

TO BE COMPLETED BY DEPARTMENT:

Property Number: 9111 Mileage / Hours if applicable: _____

Year/Description: 5040 Dell Optiplex computer 2017

Serial/Vin Number: FJ0LMF2 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

Reached end of life - equipment obsolete

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: N/A

Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: X Indicate how and by whom: to be sold for recycling. - E-Scrap

Auction: _____ Where: _____ Amount Received: _____

Other: _____ Please describe: _____

Department Head Signature: [Signature] Date: 9/14/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20170062 Acquisition Cost: \$901.11

Acquisition Date: 2/28/2017 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date: _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET # 20170062	MASTER ASSET			DESCRIPTION	DELL OPTIPLEX 5040		
CLASS 40	MACHINERY & EQU	FUND SOURCE	01				
SUBCL 116	COMPUTER	ACQUIS METH	A1 PURCHASE	MAINT CONT	Y	INSURED	N
COMMODITY				VENDOR DESC	Vendor Name Mi	CARRIER	
DEPT 0246	BUILDING DEPART	ACQUIS DATE	02/28/2017	TYPE	G	INSURED VAL	0.00
LOC CODE 344	BUILDING DEPT	ACQUIS COST	901.11	EXPIRE DATE		EXPIRE DATE	
LOC MEMO		ACRES	0.000	ANNUAL COST	0.00	POLICY CST	0.00
ROOM		QTY	1	MEMO		MEMO	
STORAGE LOC		UNIT PRICE	0.00				
		PURCH MEMO	45246515-564000	DELL			
STATUS	A ACTIVE						
CONDITION	E EXCELLENT	SOY BOOK	100.14	DEPRECIATE	Y		
CUSTODIAN	DEPT HEAD	CURRENT BOOK	0.00	DEPREC PRIN		901.11	
TITLEHOLDER		EST SALVAGE	0.00	FIRST YR/PR	2017/05	LAST YR/PR	2020/04
		REPL COST	901.11	EST LIFE	3		
TAG # 09111		LAST INVENT		PERIODS TAKEN	36		
SERIAL # FJOLMF2		IMPROVE MEMO		ACCUM DEPREC		901.11	
MANUFACTURER	DELL DELL						
MODEL	OPTIPLEX 5040	RETIRE DATE					
MODEL YEAR		DISP CODE					
LICENSE #		DISP PRICE	0.00				
		SALE PRICE	0.00				
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT		

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98051	564000		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-139

DEPARTMENT: Supervisor Of Elections

TO BE COMPLETED BY DEPARTMENT:

Property Number: 3220 Mileage / Hours if applicable:

Year/Description: Cisco ASA 5520 Firewall

Serial/Vin Number: SJMX0931KOGT Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): End of Life

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: [checked] Indicate how and by whom: End of Life - Landfill - Mutch

Auction: Where: Amount Received:

Other: Please describe:

Department Head Signature: Vicki P. Cannon Date: 9/18/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20050093 Acquisition Cost: \$6,140.00

Acquisition Date: 09/23/2005 Book Value: -0-

Financial Services Signature: Kari Uemura Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

ASSET # 20050093	MASTER ASSET	DESCRIPTION	CISCO ASA 5520 FIRE WALL
CLASS 40 MACHINERY & EQU	FUND SOURCE 01		
SUBCL 597 FIRE WALL	ACQUIS METH A1 PURCHASE	MAINT CONT N	INSURED N
COMMODITY		VENDOR DESC Vendor Name Mi	CARRIER
DEPT 0061 SUPERVISOR OF E	ACQUIS DATE 09/23/2005	TYPE G	INSURED VAL 0.00
LOC CODE 436 SUPER ELECT	ACQUIS COST 6,140.00	EXPIRE DATE	EXPIRE DATE
LOC MEMO	ACRES 0.000	ANNUAL COST 0.00	POLICY CST 0.00
ROOM	QTY 1	MEMO	MEMO
STORAGE LOC	UNIT PRICE		
	PURCH MEMO CDW GOV. INC	4524	
STATUS A ACTIVE			
CONDITION E EXCELLENT	SOY BOOK 0.00	DEPRECIATE Y	
CUSTODIAN DEPT HEAD	CURRENT BOOK 0.00	DEPREC PRIN 6,140.00	
TITLEHOLDER	EST SALVAGE 0.00	FIRST YR/PR 2005/12	LAST YR/PR 2008/11
	REPL COST 6,140.00	EST LIFE 3	
TAG # 3220	LAST INVENT 07/10/2009	PERIODS TAKEN 36	
SERIAL # SJMX0931KOGT	IMPROVE MEMO	ACCUM DEPREC 6,140.00	
MANUFACTURER CISCO CISCO			
MODEL ASA 5520	RETIRE DATE		
MODEL YEAR	DISP CODE		
LICENSE #	DISP PRICE		
	SALE PRICE 0.00		

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
5027	5000955	TV34457	TV34457	09/23/2005	4,890.00
5027	5000955	UH22285	UH22285	09/30/2005	1,250.00

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98000	277110		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-140

DEPARTMENT: Supervisor Of Elections

TO BE COMPLETED BY DEPARTMENT:

Property Number: 07753 Mileage / Hours if applicable:

Year/Description: Poweredge R720 Processors

Serial/Vin Number: DSSNZ12 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): End of Life

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: [check] Indicate how and by whom: End of Life - Landfill - Mitch

Auction: Where: Amount Received:

Other: Please describe:

Department Head Signature: Vicki P. Cannon Date: 9/18/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20140206 Acquisition Cost: \$7,861.25

Acquisition Date: 09/30/2014 Book Value: -0 -

Financial Services Signature: Kari Umer Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

09/25/2020 11:07
6235kulm

BOARD OF COMMISSIONERS
FIXED ASSET WORKSHEET

P 1
famstmnt

ASSET # 20140206	MASTER ASSET			DESCRIPTION	POWEREDGE R720 PROCESSORS			
CLASS 40	MACHINERY & EQU	FUND SOURCE 01		MAINT CONT	Y	INSURED	N	
SUBCL 138	SERVER	ACQUIS METH A1	PURCHASE	VENDOR DESC	Vendor Name Mi	CARRIER		
COMMODITY				TYPE	G	INSURED VAL		0.00
DEPT 0061	SUPERVISOR OF E	ACQUIS DATE	09/30/2014	EXPIRE DATE		EXPIRE DATE		
LOC CODE 436	SUPER ELECT	ACQUIS COST	7,861.25	ANNUAL COST	0.00	POLICY CST		0.00
LOC MEMO		ACRES	0.000	MEMO		MEMO		
ROOM		QTY	1					
STORAGE LOC		UNIT PRICE	0.00					
		PURCH MEMO	1S061513-564001	DELL				
STATUS A	ACTIVE			DEPRECIATE	Y			
CONDITION E	EXCELLENT	SOY BOOK	0.00	DEPREC PRIN		7,861.25		
CUSTODIAN	SUPERIVOR OF ELECTIO	CURRENT BOOK	0.00	FIRST YR/PR	2014/12	LAST YR/PR	2019/11	
TITLEHOLDER		EST SALVAGE	0.00	EST LIFE	5			
		REPL COST	7,861.25	PERIODS TAKEN	60			
TAG # 07753		LAST INVENT		ACCUM DEPREC		7,861.25		
SERIAL # DSSNZ12		IMPROVE MEMO						
MANUFACTURER	DELL DELL							
MODEL	POWEREDGE R720	RETIRE DATE						
MODEL YEAR		DISP CODE						
LICENSE #		DISP PRICE	0.00					
		SALE PRICE	0.00					
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE		INV AMT		

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98051	564000		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI #2020-141

DEPARTMENT: Supervisor Of Elections

TO BE COMPLETED BY DEPARTMENT:

Property Number: 07754 Mileage / Hours if applicable:

Year/Description: Poweredge R720 Processor

Serial/Vin Number: DSLPZ12 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): End of Life

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: [check] Indicate how and by whom: End of Life - Landfill - Mitch

Auction: Where: Amount Received:

Other: Please describe:

Department Head Signature: Vicki P. Cannon Date: 9/18/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20140207 Acquisition Cost: \$7,861.25

Acquisition Date: 09/30/2014 Book Value: -0-

Financial Services Signature: Kari Ulmer Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

ASSET # 20140207 MASTER ASSET DESCRIPTION POWEREDGE R720 PROCESSOR
 ADD'L DESC PROPERTY APPRAISER REIMBURSED THE SOE \$3,666.00 FOR SHARED SERVER. SERVER IS
 LOCATED AT SOE.

CLASS	40	MACHINERY & EQU	FUND SOURCE	01					
SUBCL	138	SERVER	ACQUIS METH	A1	PURCHASE	MAINT CONT	Y	INSURED	N
COMMODITY						VENDOR DESC	Vendor Name Mi	CARRIER	
DEPT	0061	SUPERVISOR OF E	ACQUIS DATE		09/30/2014	TYPE	G	INSURED VAL	0.00
LOC CODE	436	SUPER ELECT	ACQUIS COST		7,861.25	EXPIRE DATE		EXPIRE DATE	
LOC MEMO			ACRES		0.000	ANNUAL COST	0.00	POLICY CST	0.00
ROOM			QTY	1		MEMO		MEMO	
STORAGE LOC			UNIT PRICE		0.00				
			PURCH MEMO		1S061513-564001	DELL			
STATUS	A	ACTIVE							
CONDITION	E	EXCELLENT	SOY BOOK		0.00	DEPRECIATE	Y		
CUSTODIAN		SUPERIVOR OF ELECTIO	CURRENT BOOK		0.00	DEPREC PRIN		7,861.25	
TITLEHOLDER			EST SALVAGE		0.00	FIRST YR/PR	2014/12	LAST YR/PR	2019/11
			REPL COST		7,861.25	EST LIFE	5		
TAG #	07754		LAST INVENT			PERIODS TAKEN	60		
SERIAL #	DSLPE12		IMPROVE MEMO			ACCUM DEPREC	7,861.25		
MANUFACTURER	DELL	DELL							
MODEL		POWEREDGE R720	RETIRE DATE						
MODEL YEAR			DISP CODE						
LICENSE #			DISP PRICE		0.00				
			SALE PRICE		0.00				

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98051	564000		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI #2020-142

DEPARTMENT: State Attorney's Office

TO BE COMPLETED BY DEPARTMENT:

Property Number: BC 377 Mileage / Hours if applicable: _____

Year/Description: Telephone System

Serial/Vin Number: _____ Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

The telephone system has an aquisition date of 3/5/199. We were not in this building on that date and I am positive that this equipment was replaced when we moved from our previous location.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: _____ Indicate how and by whom: _____

Auction: _____ Where: _____ Amount Received: _____

Other: Please describe: _____

Department Head Signature: *Laura Card* Date: 8-27-18

2018 AUG 29 AM 8:00
RECEIVED

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20010114 Acquisition Cost: \$8,305.00

Acquisition Date: 03/05/1999 Book Value: -0-

Financial Services Signature: *Kari Umer* Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

DELETION FROM INVENTORY FORM

DI #2020-143

DEPARTMENT: FDOH- Nassau

TO BE COMPLETED BY DEPARTMENT:

Property Number: 7397 Mileage / Hours if applicable:
Year/Description: 11/02/2001 Laser Plane / Laser Level
Serial/Vin Number: FL LE16179 Indicate if a photo is included No

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):
broken

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)
Destroy: Indicate how and by whom:
Auction: Where: Amount Received:
Other: x Please describe: Convenience Recycling Center

Department Head Signature: [Signature] Date: 9/17/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20020192 Acquisition Cost: \$995.00
Acquisition Date: 11/02/2001 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair:
Ex-Officio Clerk to the Board of County Commissioners:
Date:

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

ASSET # 20020192		MASTER ASSET			DESCRIPTION	LASER LEVEL			
CLASS	40	MACHINERY & EQU	FUND SOURCE	01					
SUBCL	919	LASER PLANE	ACQUIS METH		MAINT CONT	N	INSURED	N	
COMMODITY					VENDOR DESC	Vendor Name Mi	CARRIER		
DEPT	0624	ENVIRONMENTAL H	ACQUIS DATE	11/02/2001	TYPE	G	INSURED VAL		0.00
LOC CODE	255	ENVIRONMENTAL H	ACQUIS COST	995.00	EXPIRE DATE		EXPIRE DATE		
LOC MEMO			ACRES	0.000	ANNUAL COST		POLICY CST		0.00
ROOM			QTY		MEMO		MEMO		
STORAGE LOC			UNIT PRICE	0.00					
			PURCH MEMO	FLORIDA LEVEL & TRANTS					
STATUS	A	ACTIVE							
CONDITION	E	EXCELLENT	SOY BOOK	0.00	DEPRECIATE	Y			
CUSTODIAN	HUMAN SERVICES		CURRENT BOOK	0.00	DEPREC PRIN		995.00		
TITLEHOLDER			EST SALVAGE	0.00	FIRST YR/PR	2002/02	LAST YR/PR		2012/01
			REPL COST	995.00	EST LIFE	10			
TAG #	07397		LAST INVENT		PERIODS TAKEN	120			
SERIAL #	16178		IMPROVE MEMO		ACCUM DEPREC		995.00		
MANUFACTURER	FL LE FL LEVEL								
MODEL			RETIRE DATE						
MODEL YEAR	2001		DISP CODE						
LICENSE #			DISP PRICE						
			SALE PRICE	0.00					

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98000	277175		100.00
5	DEPRECIATION EXPENSE	98056	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-144

DEPARTMENT: FDOH- Nassau

TO BE COMPLETED BY DEPARTMENT:

Property Number: 7398 Mileage / Hours if applicable:

Year/Description: 11/02/2001 Laser Plane / Laser Level

Serial/Vin Number: FL LE16179 Indicate if a photo is included No

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): broken

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: Indicate how and by whom:

Auction: Where: Amount Received:

Other: x Please describe: Convenience Recycling Center

Department Head Signature: [Signature] Date: 9/17/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20020193 Acquisition Cost: \$995.00

Acquisition Date: 11/02/2001 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date:

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

ASSET # 20020193	MASTER ASSET		DESCRIPTION	LASER LEVEL	
CLASS 40	MACHINERY & EQU	FUND SOURCE 01			
SUBCL 919	LASER PLANE	ACQUIS METH A1 PURCHASE	MAINT CONT N	INSURED N	
COMMODITY			VENDOR DESC Vendor Name Mi	CARRIER	
DEPT 0624	ENVIRONMENTAL H	ACQUIS DATE 11/02/2001	TYPE G	INSURED VAL	0.00
LOC CODE 255	ENVIRONMENTAL H	ACQUIS COST 995.00	EXPIRE DATE	EXPIRE DATE	
LOC MEMO		ACRES 0.000	ANNUAL COST 0.00	POLICY CST	0.00
ROOM		QTY	MEMO	MEMO	
STORAGE LOC		UNIT PRICE 0.00			
		PURCH MEMO FL LEVEL & TRANSIT			
STATUS A	ACTIVE		DEPRECIATE Y		
CONDITION E	EXCELLENT	SOY BOOK 0.00	DEPREC PRIN 995.00		
CUSTODIAN	HUMAN SERVICES	CURRENT BOOK 0.00	FIRST YR/PR 2002/02	LAST YR/PR	2012/01
TITLEHOLDER		EST SALVAGE 0.00	EST LIFE 10		
		REPL COST 995.00	PERIODS TAKEN 120		
TAG # 07398		LAST INVENT	ACCUM DEPREC 995.00		
SERIAL # 16179		IMPROVE MEMO			
MANUFACTURER	FL LE FL LEVEL				
MODEL		RETIRE DATE			
MODEL YEAR 2001		DISP CODE			
LICENSE #		DISP PRICE			
		SALE PRICE 0.00			

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98000	277175		100.00
5	DEPRECIATION EXPENSE	98056	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-145

DEPARTMENT: FDOH- Nassau

TO BE COMPLETED BY DEPARTMENT:

Property Number: EH 2 Mileage / Hours if applicable: _____

Year/Description: 7/1/1992 Laser Plane w/tripod & spectraphysics Pole Model 984

Serial/Vin Number: 3749 Indicate if a photo is included No

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

broken

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: _____ Indicate how and by whom: _____

Auction: _____ Where: _____ Amount Received: _____

Other: Please describe: Convenience Recycling Center

Department Head Signature: Date: 9/17/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20010904 Acquisition Cost: \$1,632.60

Acquisition Date: 07/01/1992 Book Value: -0-

Financial Services Signature: Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date: _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET # 20010904	MASTER ASSET		DESCRIPTION LASER PLANE	
	ADD'L DESC	125 W/TRIPOD & SPECTRAPHICS POLE MODEL 984		
CLASS 40	MACHINERY & EQU	FUND SOURCE 01		
SUBCL 919	LASER PLANE	ACQUIS METH A1 PURCHASE	MAINT CONT N	INSURED N
COMMODITY			VENDOR DESC Vendor Name Mi	CARRIER
DEPT 0624	ENVIRONMENTAL H	ACQUIS DATE 07/01/1992	TYPE G	INSURED VAL 0.00
LOC CODE 255	ENVIRONMENTAL H	ACQUIS COST 1,632.60	EXPIRE DATE	EXPIRE DATE
LOC MEMO		ACRES 0.000	ANNUAL COST 0.00	POLICY CST 0.00
ROOM		QTY	MEMO	MEMO
STORAGE LOC		UNIT PRICE 0.00		
		PURCH MEMO FLORIDA LEVEL & TRANSI		
STATUS A	ACTIVE			
CONDITION E	EXCELLENT	SOY BOOK 0.00	DEPRECIATE Y	
CUSTODIAN HUMAN SERVICES		CURRENT BOOK 0.00	DEPREC PRIN 1,632.60	
TITLEHOLDER		EST SALVAGE 0.00	FIRST YR/PR 1992/10	LAST YR/PR 2002/09
		REPL COST 1,632.60	EST LIFE 10	
TAG # EH 2		LAST INVENT	PERIODS TAKEN 120	
SERIAL # 3749		IMPROVE MEMO	ACCUM DEPREC 1,632.60	
MANUFACTURER				
MODEL		RETIRE DATE		
MODEL YEAR		DISP CODE		
LICENSE #		DISP PRICE		
		SALE PRICE 0.00		

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98000	277175		100.00
5	DEPRECIATION EXPENSE	98056	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-146

DEPARTMENT: FDOH- Nassau

TO BE COMPLETED BY DEPARTMENT:

Property Number: 7399 Mileage / Hours if applicable: _____

Year/Description: 01/16/200 Laser Plane w/tripod & spectraphysics Pole Model 984

Serial/Vin Number: LSR 5479 Indicate if a photo is included No

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

broken

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____


Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: _____ Indicate how and by whom: _____

Auction: _____ Where: _____ Amount Received: _____

Other: Please describe: Convenience Recycling Center

Department Head Signature:  Date: 9/17/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20040040 Acquisition Cost: \$995.00

Acquisition Date: 01/16/2003 Book Value: -0-

Financial Services Signature:  Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date: _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET # 20040040	MASTER ASSET	DESCRIPTION	LASER KIT		
	ADD'L DESC	LEVELING SYSTEM W/10THS ROD, TRIPOD & RECEI.			
CLASS 40	MACHINERY & EQU	FUND SOURCE 01			
SUBCL 569	LEVEL	ACQUIS METH A1 PURCHASE	MAINT CONT N	INSURED N	
COMMODITY			VENDOR DESC	Vendor Name Mi	
DEPT 0625	HEALTH DEPARTME	ACQUIS DATE 01/16/2003	TYPE G	INSURED VAL 0.00	
LOC CODE 255	ENVIRONMENTAL H	ACQUIS COST 995.00	EXPIRE DATE	EXPIRE DATE	
LOC MEMO		ACRES 0.000	ANNUAL COST 0.00	POLICY CST 0.00	
ROOM		QTY 1	MEMO	MEMO	
STORAGE LOC		UNIT PRICE			
		PURCH MEMO LSR			
STATUS A	ACTIVE				
CONDITION E	EXCELLENT	SOY BOOK 0.11	DEPRECIATE Y		
CUSTODIAN	HUMAN SERVICES	CURRENT BOOK 0.11	DEPREC PRIN 995.00		
TITLEHOLDER		EST SALVAGE 0.00	FIRST YR/PR 2003/04	LAST YR/PR 2018/03	
		REPL COST 995.00	EST LIFE 15		
TAG # 07399		LAST INVENT 07/01/2008	PERIODS TAKEN 180		
SERIAL # 5479		IMPROVE MEMO	ACCUM DEPREC 995.00		
MANUFACTURER	LSR LSR				
MODEL		RETIRE DATE			
MODEL YEAR		DISP CODE			
LICENSE #		DISP PRICE			
		SALE PRICE 0.00			
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98000	277175		100.00
5	DEPRECIATION EXPENSE	98056	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-147

DEPARTMENT: Health Department

TO BE COMPLETED BY DEPARTMENT:

Property Number: 5797 Mileage / Hours if applicable: _____

Year/Description: DELL SERVER

Serial/Vin Number: 7GP7ZC1 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

Surplus recycle out of date.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: _____ Indicate how and by whom: _____

Auction: _____ Where: _____ Amount Received: _____

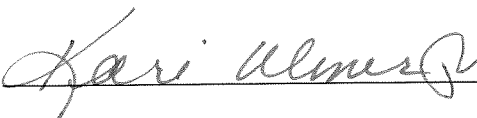
Other: X Please describe: Recycling E-Scrap

Department Head Signature:  Date: 9/17/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20070504 Acquisition Cost: \$6,573.24

Acquisition Date: 05/23/2007 Book Value: -0-

Financial Services Signature:  Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date: _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

09/25/2020 11:09
6235kulm

|BOARD OF COMMISSIONERS
|FIXED ASSET WORKSHEET

|P 1
|famstmnt

ASSET # 20070504		MASTER ASSET			DESCRIPTION	DELL SERVER			
CLASS	40	MACHINERY & EQU	FUND SOURCE	01					
SUBCL	138	SERVER	ACQUIS METH	A1	PURCHASE	MAINT CONT	Y	INSURED	N
COMMODITY						VENDOR DESC	Vendor Name Mi	CARRIER	
DEPT	0625	HEALTH DEPARTME	ACQUIS DATE		05/23/2007	TYPE	G	INSURED VAL	0.00
LOC CODE	254	HEALTH DEPT	ACQUIS COST		6,573.24	EXPIRE DATE		EXPIRE DATE	
LOC MEMO			ACRES		0.000	ANNUAL COST	0.00	POLICY CST	0.00
ROOM			QTY	1		MEMO		MEMO	
STORAGE LOC			UNIT PRICE		0.00				
			PURCH MEMO						
STATUS	A	ACTIVE							
CONDITION	E	EXCELLENT	SOY BOOK		0.00	DEPRECIATE	Y		
CUSTODIAN	DEPT HEAD		CURRENT BOOK		0.00	DEPREC PRIN		6,573.24	
TITLEHOLDER			EST SALVAGE		0.00	FIRST YR/PR	2007/08	LAST YR/PR	2012/07
			REPL COST		6,573.24	EST LIFE	5		
TAG #	05797		LAST INVENT		07/01/2008	PERIODS TAKEN	60		
SERIAL #	7GP7ZC1		IMPROVE MEMO			ACCUM DEPREC		6,573.24	
MANUFACTURER	DELL	DELL							
MODEL			RETIRE DATE						
MODEL YEAR			DISP CODE						
LICENSE #			DISP PRICE		0.00				
			SALE PRICE		0.00				

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98000	277175		100.00
5	DEPRECIATION EXPENSE	98056	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-148

DEPARTMENT: Health Department

TO BE COMPLETED BY DEPARTMENT:

Property Number: 6858 Mileage / Hours if applicable: _____

Year/Description: DELL PE R510 SERVER

Serial/Vin Number: J86M5M1 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

Surplus recycle out of date. _____

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: _____ Indicate how and by whom: _____

Auction: _____ Where: _____ Amount Received: _____

Other: Please describe: Recycling E-Scrap

Department Head Signature: Date: 9/17/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20120055 Acquisition Cost: \$8,948.50

Acquisition Date: 03/31/2010 Book Value: -0-

Financial Services Signature: Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

625

ASSET # 20120055	MASTER ASSET		DESCRIPTION		DELL PE R510 SERVER	
CLASS 40	MACHINERY & EQU	FUND SOURCE 02				
SUBCL 138	SERVER	ACQUIS METH A1	PURCHASE	MAINT CONT Y	INSURED	N
COMMODITY				VENDOR DESC	Vendor Name Mi	CARRIER
DEPT 0625	HEALTH DEPARTME	ACQUIS DATE	03/31/2010	TYPE G		INSURED VAL 0.00
LOC CODE 254	HEALTH DEPT	ACQUIS COST	8,948.50	EXPIRE DATE		EXPIRE DATE
LOC MEMO		ACRES	0.000	ANNUAL COST	0.00	POLICY CST 0.00
ROOM		QTY 1		MEMO		MEMO
STORAGE LOC		UNIT PRICE	0.00			
		PURCH MEMO				
STATUS A	ACTIVE			DEPRECIATE Y		
CONDITION E	EXCELLENT	SOY BOOK	0.06	DEPREC PRIN	8,948.50	
CUSTODIAN	DEPT HEAD	CURRENT BOOK	0.06	FIRST YR/PR	2010/06	LAST YR/PR 2015/05
TITLEHOLDER		EST SALVAGE	0.00	EST LIFE	5	
		REPL COST	8,948.50	PERIODS TAKEN	60	
TAG # 06858		LAST INVENT		ACCUM DEPREC	8,948.50	
SERIAL # J86M5M1		IMPROVE MEMO				
MANUFACTURER	DELL DELL					
MODEL	PE R510	RETIRE DATE				
MODEL YEAR	2010	DISP CODE				
LICENSE #		DISP PRICE	0.00			
		SALE PRICE	0.00			

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98056	564000		100.00
5	DEPRECIATION EXPENSE	98056	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-149

DEPARTMENT: Health Department

TO BE COMPLETED BY DEPARTMENT:

Property Number: 6859 Mileage / Hours if applicable: _____

Year/Description: DELL LATITUDE E6500 LAPTOP

Serial/Vin Number: JVWQYK1 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

Surplus recycle out of date.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: _____ Indicate how and by whom: _____

Auction: _____ Where: _____ Amount Received: _____

Other: Please describe: Recycling E-Scrap

Department Head Signature: *[Signature]* Date: 9/17/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20120056 Acquisition Cost: \$1,298.00

Acquisition Date: 10/13/2009 Book Value: -0-

Financial Services Signature: *[Signature]* Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date: _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

25

ASSET # 20120056	MASTER ASSET	DESCRIPTION	DELL LATITUDE E6500 LAPTOP
CLASS 40 MACHINERY & EQU	FUND SOURCE 02	MAINT CONT Y	INSURED N
SUBCL 116 COMPUTER	ACQUIS METH A1 PURCHASE	VENDOR DESC Vendor Name Mi	CARRIER
COMMODITY		TYPE G	INSURED VAL 0.00
DEPT 0625 HEALTH DEPARTME	ACQUIS DATE 10/13/2009	EXPIRE DATE	EXPIRE DATE
LOC CODE 254 HEALTH DEPT	ACQUIS COST 1,298.00	ANNUAL COST 0.00	POLICY CST 0.00
LOC MEMO	ACRES 0.000	MEMO	MEMO
ROOM	QTY 1		
STORAGE LOC	UNIT PRICE 0.00		
	PURCH MEMO		
STATUS A ACTIVE		DEPRECIATE Y	
CONDITION E EXCELLENT	SOY BOOK 0.00	DEPREC PRIN 1,298.00	
CUSTODIAN DEPT HEAD	CURRENT BOOK 0.00	FIRST YR/PR 2010/01	LAST YR/PR 2012/12
TITLEHOLDER	EST SALVAGE 0.00	EST LIFE 3	
	REPL COST 1,298.00	PERIODS TAKEN 36	
TAG # 06859	LAST INVENT	ACCUM DEPREC 1,298.00	
SERIAL # JVWQYK1	IMPROVE MEMO		
MANUFACTURER DELL DELL			
MODEL LATITUDE E6500	RETIRE DATE		
MODEL YEAR 2009	DISP CODE		
LICENSE #	DISP PRICE 0.00		
	SALE PRICE 0.00		

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98056	564000		100.00
5	DEPRECIATION EXPENSE	98056	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-150

DEPARTMENT: Health Department

TO BE COMPLETED BY DEPARTMENT:

Property Number: 6861 Mileage / Hours if applicable:

Year/Description: DELL PV114T LTO2-L TAPE RACK E

Serial/Vin Number: GSYTXH1 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

Surplus recycle out of date.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: Indicate how and by whom:

Auction: Where: Amount Received:

Other: X Please describe: Recycling E-Scrap

Department Head Signature: [Signature] Date: 9/17/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20120058 Acquisition Cost: \$2,424.09

Acquisition Date: 03/24/2010 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

625

ASSET # 20120058	MASTER ASSET	DESCRIPTION	DELL PV114T LT02-L TAPE RACK ENCLOSURE
CLASS 40 MACHINERY & EQU	FUND SOURCE 02		
SUBCL 585 RACK	ACQUIS METH A1 PURCHASE	MAINT CONT Y	INSURED N
COMMODITY		VENDOR DESC Vendor Name Mi	CARRIER
DEPT 0625 HEALTH DEPARTME	ACQUIS DATE 03/24/2010	TYPE G	INSURED VAL 0.00
LOC CODE 254 HEALTH DEPT	ACQUIS COST 2,424.09	EXPIRE DATE	EXPIRE DATE
LOC MEMO	ACRES 0.000	ANNUAL COST 0.00	POLICY CST 0.00
ROOM	QTY 1	MEMO	MEMO
STORAGE LOC	UNIT PRICE 0.00		
	PURCH MEMO		
STATUS A ACTIVE			
CONDITION E EXCELLENT	SOY BOOK 0.05	DEPRECIATE Y	
CUSTODIAN DEPT HEAD	CURRENT BOOK 0.05	DEPREC PRN 2,424.09	
TITLEHOLDER	EST SALVAGE 0.00	FIRST YR/PR 2010/06	LAST YR/PR 2015/05
	REPL COST 2,424.09	EST LIFE 5	
TAG # 06861	LAST INVENT	PERIODS TAKEN 60	
SERIAL # GSXTXH1	IMPROVE MEMO	ACCUM DEPREC 2,424.09	
MANUFACTURER DELL DELL			
MODEL PV114T	RETIRE DATE		
MODEL YEAR 2010	DISP CODE		
LICENSE #	DISP PRICE 0.00		
	SALE PRICE 0.00		

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98056	564000		100.00
5	DEPRECIATION EXPENSE	98056	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI #2020-151

DEPARTMENT: Health Department

TO BE COMPLETED BY DEPARTMENT:

Property Number: 7385 Mileage / Hours if applicable:

Year/Description: MD3220I SAN

Serial/Vin Number: 11T9ZV1 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

Surplus recycle out of date.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: Indicate how and by whom:

Auction: Where: Amount Received:

Other: X Please describe: Recycling E-Scrap

Department Head Signature: [Signature] Date: 9/17/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20130318 Acquisition Cost: \$15,975.06

Acquisition Date: 12/06/2012 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

625

ASSET # 20130318		MASTER ASSET			DESCRIPTION MD3220I SAN				
CLASS 40	MACHINERY & EQU	FUND SOURCE 01							
SUBCL 116	COMPUTER	ACQUIS METH A1	PURCHASE		MAINT CONT Y		INSURED N		
COMMODITY					VENDOR DESC Vendor Name Mi		CARRIER		
DEPT 0625	HEALTH DEPARTME	ACQUIS DATE 12/06/2012			TYPE G		INSURED VAL	0.00	
LOC CODE 254	HEALTH DEPT	ACQUIS COST 15,975.06			EXPIRE DATE		EXPIRE DATE		
LOC MEMO		ACRES 0.000			ANNUAL COST 0.00		POLICY CST	0.00	
ROOM		QTY 1			MEMO		MEMO		
STORAGE LOC		UNIT PRICE 0.00							
		PURCH MEMO DELL							
STATUS A	ACTIVE								
CONDITION E	EXCELLENT	SOY BOOK 0.04			DEPRECIATE Y				
CUSTODIAN	DEPT HEAD	CURRENT BOOK 0.04			DEPREC PRIN 15,975.06				
TITLEHOLDER		EST SALVAGE 0.00			FIRST YR/PR 2013/03		LAST YR/PR 2016/02		
		REPL COST 15,975.06			EST LIFE 3				
TAG # 07385		LAST INVENT			PERIODS TAKEN 36				
SERIAL # 11T9ZV1		IMPROVE MEMO			ACCUM DEPREC 15,975.06				
MANUFACTURER	DELL DELL								
MODEL	PV MD3220I	RETIRE DATE							
MODEL YEAR		DISP CODE							
LICENSE #		DISP PRICE 0.00							
		SALE PRICE 0.00							

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98056	564000		100.00
5	DEPRECIATION EXPENSE	98056	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI #2020-152

DEPARTMENT: Health Department

TO BE COMPLETED BY DEPARTMENT:

Property Number: 7388 Mileage / Hours if applicable: _____

Year/Description: POWEREDGE R720

Serial/Vin Number: 1DF8ZV1 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

Surplus recycle out of date.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: _____ Indicate how and by whom: _____

Auction: _____ Where: _____ Amount Received: _____

Other: Please describe: Recycling E-Scrap

Department Head Signature: *E. J. ...* Date: 9/17/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20130321 Acquisition Cost: \$4,996.69

Acquisition Date: 12/10/2012 Book Value: -0-

Financial Services Signature: *Kari Uemer* Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date: _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

WJS

ASSET # 20130321	MASTER ASSET			DESCRIPTION	POWEREDGE R720			
CLASS 40	MACHINERY & EQU	FUND SOURCE	01	MAINT CONT	Y	INSURED	N	
SUBCL 116	COMPUTER	ACQUIS METH	A1 PURCHASE	VENDOR DESC	Vendor Name Mi	CARRIER		
COMMODITY		ACQUIS DATE	12/10/2012	TYPE	G	INSURED VAL	0.00	
DEPT 0625	HEALTH DEPARTME	ACQUIS COST	4,996.69	EXPIRE DATE		EXPIRE DATE		
LOC CODE 254	HEALTH DEPT	ACRES	0.000	ANNUAL COST	0.00	POLICY CST	0.00	
LOC MEMO		QTY	1	MEMO		MEMO		
ROOM		UNIT PRICE	0.00					
STORAGE LOC		PURCH MEMO	DELL					
STATUS A	ACTIVE			DEPRECIATE	Y			
CONDITION E	EXCELLENT	SOY BOOK	0.08	DEPREC PRIN		4,996.69		
CUSTODIAN	DEPT HEAD	CURRENT BOOK	0.08	FIRST YR/PR	2013/03	LAST YR/PR	2016/02	
TITLEHOLDER		EST SALVAGE	0.00	EST LIFE	3			
		REPL COST	4,996.69	PERIODS TAKEN	36			
TAG # 07388		LAST INVENT		ACCUM DEPREC		4,996.69		
SERIAL # 1DF8ZV1		IMPROVE MEMO						
MANUFACTURER	DELL DELL							
MODEL R720		RETIRE DATE						
MODEL YEAR		DISP CODE						
LICENSE #		DISP PRICE	0.00					
		SALE PRICE	0.00					
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT			

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98056	564000		100.00
5	DEPRECIATION EXPENSE	98056	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-153

DEPARTMENT: Health Department

TO BE COMPLETED BY DEPARTMENT:

Property Number: 7389 Mileage / Hours if applicable: _____

Year/Description: POWEREDGE R720

Serial/Vin Number: 1DFCZV1 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

Surplus recycle out of date.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: _____ Indicate how and by whom: _____

Auction: _____ Where: _____ Amount Received: _____

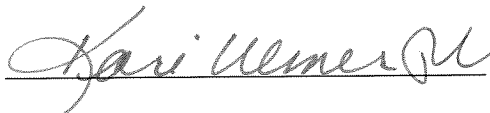
Other: Please describe: Recycling E-Scrap

Department Head Signature:  Date: 9/17/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20130322 Acquisition Cost: \$4,996.69

Acquisition Date: 12/10/2012 Book Value: -0-

Financial Services Signature:  Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date: _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET # 20130322	MASTER ASSET	DESCRIPTION	POWEREDGE R720		
CLASS 40 MACHINERY & EQU	FUND SOURCE 01	MAINT CONT	Y		
SUBCL 116 COMPUTER	ACQUIS METH A1 PURCHASE	INSURED	N		
COMMODITY		VENDOR DESC	Vendor Name Mi		
DEPT 0625 HEALTH DEPARTME	ACQUIS DATE 12/10/2012	TYPE	G		
LOC CODE 254 HEALTH DEPT	ACQUIS COST 4,996.69	EXPIRE DATE			
LOC MEMO	ACRES 0.000	ANNUAL COST	0.00		
ROOM	QTY 1	MEMO			
STORAGE LOC	UNIT PRICE 0.00				
	PURCH MEMO DELL				
STATUS A ACTIVE		DEPRECIATE	Y		
CONDITION E EXCELLENT	SOY BOOK 0.08	DEPREC PRIN	4,996.69		
CUSTODIAN DEPT HEAD	CURRENT BOOK 0.08	FIRST YR/PR	2013/03		
TITLEHOLDER	EST SALVAGE 0.00	EST LIFE	3		
	REPL COST 4,996.69	PERIODS TAKEN	36		
TAG # 07389	LAST INVENT	ACCUM DEPREC	4,996.69		
SERIAL # 1DFCZV1	IMPROVE MEMO				
MANUFACTURER DELL DELL					
MODEL R720	RETIRE DATE				
MODEL YEAR	DISP CODE				
LICENSE #	DISP PRICE 0.00				
	SALE PRICE 0.00				
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98056	564000		100.00
5	DEPRECIATION EXPENSE	98056	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI #2020-154

DEPARTMENT: Health Department

TO BE COMPLETED BY DEPARTMENT:

Property Number: 8414 Mileage / Hours if applicable: _____

Year/Description: MICROSOFT SURFACE PRO 3-12"

Serial/Vin Number: 48282445053 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

Surplus recycle out of date.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

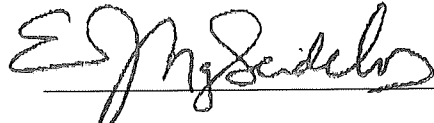
Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: _____ Indicate how and by whom: _____

Auction: _____ Where: _____ Amount Received: _____

Other: Please describe: Recycling E-Scrap

Department Head Signature:  Date: 9/17/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20150148 Acquisition Cost: \$1,801.57

Acquisition Date: 01/26/2015 Book Value: -0-

Financial Services Signature:  Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date: _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET # 20150148	MASTER ASSET	DESCRIPTION	MIRCOSFT SURFACE PRO 3-12" CORE I7
CLASS 40 MACHINERY & EQU	FUND SOURCE 01	MAINT CONT	Y INSURED N
SUBCL 172 TABLET	ACQUIS METH A1 PURCHASE	VENDOR DESC	Vendor Name Mi CARRIER
COMMODITY		TYPE	G INSURED VAL 0.00
DEPT 0625 HEALTH DEPARTME	ACQUIS DATE 01/26/2015	EXPIRE DATE	EXPIRE DATE
LOC CODE 254 HEALTH DEPT	ACQUIS COST 1,801.57	ANNUAL COST	0.00 POLICY CST 0.00
LOC MEMO	ACRES 0.000	MEMO	MEMO
ROOM	QTY 1		
STORAGE LOC	UNIT PRICE 0.00		
	PURCH MEMO CDWG		
STATUS A ACTIVE		DEPRECIATE	Y
CONDITION E EXCELLENT	SOY BOOK 0.00	DEPREC PRIN	1,801.57
CUSTODIAN DEPT HEAD	CURRENT BOOK 0.00	FIRST YR/PR	2015/04 LAST YR/PR 2018/03
TITLEHOLDER	EST SALVAGE 0.00	EST LIFE	3
	REPL COST 1,801.57	PERIODS TAKEN	36
TAG # 08414	LAST INVENT	ACCUM DEPREC	1,801.57
SERIAL # 48282445053	IMPROVE MEMO		
MANUFACTURER MICRO MICROSOFT			
MODEL 4650U	RETIRE DATE		
MODEL YEAR	DISP CODE		
LICENSE #	DISP PRICE 0.00		
	SALE PRICE 0.00		

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98056	564000		100.00
5	DEPRECIATION EXPENSE	98056	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI #2020-155

DEPARTMENT: Health Department

TO BE COMPLETED BY DEPARTMENT:

Property Number: 8714 Mileage / Hours if applicable: _____

Year/Description: DELL LATITUDE E6540

Serial/Vin Number: GHV0J72 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

Surplus recycle out of date.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: _____ Indicate how and by whom: _____

Auction: _____ Where: _____ Amount Received: _____

Other: Please describe: Recycling E-Scrap

Department Head Signature:  Date: 9/17/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20160043 Acquisition Cost: \$1,275.00

Acquisition Date: 01/25/2016 Book Value: -0-

Financial Services Signature:  Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date: _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET # 20160043	MASTER ASSET	DESCRIPTION	DELL	LATITUDE E6540	
CLASS 40	MACHINERY & EQU	FUND SOURCE	01		
SUBCL 116	COMPUTER	ACQUIS METH	A1	PURCHASE	
COMMODITY		MAINT CONT	Y	INSURED	N
DEPT 0625	HEALTH DEPARTME	VENDOR DESC	Vendor Name Mi	CARRIER	
LOC CODE 254	HEALTH DEPT	ACQUIS DATE	01/25/2016	INSURED VAL	0.00
LOC MEMO		ACQUIS COST	1,275.00	EXPIRE DATE	
ROOM		ACRES	0.000	ANNUAL COST	0.00
STORAGE LOC		QTY	1	MEMO	MEMO
		UNIT PRICE	0.00		
		PURCH MEMO	DELL		
STATUS A	ACTIVE				
CONDITION E	EXCELLENT	SOY BOOK	0.00	DEPRECIATE	Y
CUSTODIAN	DEPT HEAD	CURRENT BOOK	0.00	DEPREC PRIN	1,275.00
TITLEHOLDER		EST SALVAGE	0.00	FIRST YR/PR	2016/04
		REPL COST	1,275.00	EST LIFE	3
TAG # 08714		LAST INVENT		PERIODS TAKEN	36
SERIAL # GHV0J72		IMPROVE MEMO		ACCUM DEPREC	1,275.00
MANUFACTURER	DELL DELL				
MODEL	LATITUDE E6540	RETIRE DATE			
MODEL YEAR		DISP CODE			
LICENSE #		DISP PRICE	0.00		
		SALE PRICE	0.00		

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98056	564000		100.00
5	DEPRECIATION EXPENSE	98056	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI #2020-156

DEPARTMENT: Health Department

TO BE COMPLETED BY DEPARTMENT:

Property Number: 9124 Mileage / Hours if applicable: _____

Year/Description: DELL LATITUDE E5470 XCTO

Serial/Vin Number: GPSVVF2 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

Surplus recycle out of date.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: _____ Indicate how and by whom: _____

Auction: _____ Where: _____ Amount Received: _____

Other: Please describe: Recycling E-Scrap

Department Head Signature:  Date: 9/17/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20170075 Acquisition Cost: \$970.28

Acquisition Date: 02/01/2017 Book Value: -0-

Financial Services Signature:  Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET # 20170075	MASTER ASSET	DESCRIPTION	DELL LATITUDE E5470 XCTO
CLASS 40 MACHINERY & EQU	FUND SOURCE 01	MAINT CONT Y	INSURED N
SUBCL 116 COMPUTER	ACQUIS METH A1 PURCHASE	VENDOR DESC Vendor Name Mi	CARRIER
COMMODITY		TYPE G	INSURED VAL 0.00
DEPT 0625 HEALTH DEPARTME	ACQUIS DATE 02/01/2017	EXPIRE DATE	EXPIRE DATE
LOC CODE 254 HEALTH DEPT	ACQUIS COST 970.28	ANNUAL COST 0.00	POLICY CST 0.00
LOC MEMO	ACRES 0.000	MEMO	MEMO
ROOM	QTY 1		
STORAGE LOC	UNIT PRICE 0.00		
	PURCH MEMO DELL		
STATUS A ACTIVE		DEPRECIATE Y	
CONDITION E EXCELLENT	SOY BOOK 107.82	DEPREC PRIN 970.28	
CUSTODIAN DEPT HEAD	CURRENT BOOK 0.00	FIRST YR/PR 2017/05	LAST YR/PR 2020/04
TITLEHOLDER	EST SALVAGE 0.00	EST LIFE 3	
	REPL COST 970.28	PERIODS TAKEN 36	
TAG # 09124	LAST INVENT	ACCUM DEPREC 970.28	
SERIAL # GPSVVF2	IMPROVE MEMO		
MANUFACTURER DELL DELL			
MODEL LATITUDE E5470	RETIRE DATE		
MODEL YEAR	DISP CODE		
LICENSE #	DISP PRICE 0.00		
	SALE PRICE 0.00		

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98056	564000		100.00
5	DEPRECIATION EXPENSE	98056	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-157

DEPARTMENT: Health Department

TO BE COMPLETED BY DEPARTMENT:

Property Number: 9138 Mileage / Hours if applicable: _____

Year/Description: LATITUDE E5470 XCTO

Serial/Vin Number: 5NSJZF2 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

Surplus recycle out of date.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: _____ Indicate how and by whom: _____

Auction: _____ Where: _____ Amount Received: _____


Other: Please describe: Recycling E-Scrap

Department Head Signature:  Date: 9/17/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20170088 Acquisition Cost: \$970.28

Acquisition Date: 04/03/2017 Book Value: -0-

Financial Services Signature:  Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET # 20170088	MASTER ASSET		DESCRIPTION		LATITUDE E5470 XCTO	
CLASS 40	MACHINERY & EQU	FUND SOURCE 01				
SUBCL 116	COMPUTER	ACQUIS METH A1	PURCHASE	MAINT CONT Y	INSURED N	
COMMODITY				VENDOR DESC Vendor Name Mi	CARRIER	
DEPT 0625	HEALTH DEPARTME	ACQUIS DATE 04/03/2017		TYPE G	INSURED VAL	0.00
LOC CODE 254	HEALTH DEPT	ACQUIS COST 970.28		EXPIRE DATE	EXPIRE DATE	
LOC MEMO		ACRES 0.000		ANNUAL COST 0.00	POLICY CST	0.00
ROOM		QTY 1		MEMO	MEMO	
STORAGE LOC		UNIT PRICE 0.00				
		PURCH MEMO DELL				
STATUS A	ACTIVE					
CONDITION E	EXCELLENT	SOY BOOK 161.73		DEPRECIATE Y		
CUSTODIAN DEPT HEAD		CURRENT BOOK 0.00		DEPREC PRIN 970.28		
TITLEHOLDER		EST SALVAGE 0.00		FIRST YR/PR 2017/07	LAST YR/PR 2020/06	
		REPL COST 970.28		EST LIFE 3		
TAG # 09138		LAST INVENT		PERIODS TAKEN 36		
SERIAL # 5NSJZF2		IMPROVE MEMO		ACCUM DEPREC 970.28		
MANUFACTURER DELL DELL						
MODEL LATITUDE E5470		RETIRE DATE				
MODEL YEAR		DISP CODE				
LICENSE #		DISP PRICE 0.00				
		SALE PRICE 0.00				

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98056	564000		100.00
5	DEPRECIATION EXPENSE	98056	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI #2020-158

DEPARTMENT: Health Department

TO BE COMPLETED BY DEPARTMENT:

Property Number: 9141 Mileage / Hours if applicable:

Year/Description: LATITUDE E5470 XCTO

Serial/Vin Number: 12ZKZF2 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

Surplus recycle out of date.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: Indicate how and by whom:

Auction: Where: Amount Received:

Other: X Please describe: Recycling E-Scrap

Department Head Signature: [Signature] Date: 9/17/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20170091 Acquisition Cost: \$970.28

Acquisition Date: 04/30/2017 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date:

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

ASSET # 20170091	MASTER ASSET	DESCRIPTION	LATITUDE E5470	XCTO
CLASS 40 MACHINERY & EQU	FUND SOURCE 01	MAINT CONT Y	INSURED	N
SUBCL 116 COMPUTER	ACQUIS METH A1 PURCHASE	VENDOR DESC Vendor Name Mi	CARRIER	
COMMODITY		TYPE G	INSURED VAL	0.00
DEPT 0625 HEALTH DEPARTME	ACQUIS DATE 04/03/2017	EXPIRE DATE	EXPIRE DATE	
LOC CODE 254 HEALTH DEPT	ACQUIS COST 970.28	ANNUAL COST 0.00	POLICY CST	0.00
LOC MEMO	ACRES 0.000	MEMO	MEMO	
ROOM	QTY 1			
STORAGE LOC	UNIT PRICE 0.00			
	PURCH MEMO DELL			
STATUS A ACTIVE		DEPRECIATE Y		
CONDITION E EXCELLENT	SOY BOOK 161.73	DEPREC PRIN 970.28		
CUSTODIAN DEPT HEAD	CURRENT BOOK 0.00	FIRST YR/PR 2017/07	LAST YR/PR 2020/06	
TITLEHOLDER	EST SALVAGE 0.00	EST LIFE 3		
	REPL COST 970.28	PERIODS TAKEN 36		
TAG # 09141	LAST INVENT	ACCUM DEPREC 970.28		
SERIAL # 12ZKZF2	IMPROVE MEMO			
MANUFACTURER DELL DELL				
MODEL LATITUDE E5470	RETIRE DATE			
MODEL YEAR	DISP CODE			
LICENSE #	DISP PRICE 0.00			
	SALE PRICE 0.00			

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98056	564000		100.00
5	DEPRECIATION EXPENSE	98056	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-159

DEPARTMENT: Health Department

TO BE COMPLETED BY DEPARTMENT:

Property Number: 9148 Mileage / Hours if applicable: _____

Year/Description: DELL LATITUDE E5470 XCTO

Serial/Vin Number: 2QSVVF2 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

Surplus recycle out of date. _____

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: _____ Indicate how and by whom: _____

Auction: _____ Where: _____ Amount Received: _____

Other: Please describe: Recycling E-Scrap

Department Head Signature:  Date: 9/17/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20170099 Acquisition Cost: \$970.28

Acquisition Date: 02/01/2017 Book Value: -0-

Financial Services Signature:  Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date: _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET # 20170099	MASTER ASSET		DESCRIPTION	DELL	LATITUDE E5470	XCTO
CLASS 40	MACHINERY & EQU	FUND SOURCE 01	MAINT CONT	Y	INSURED	N
SUBCL 116	COMPUTER	ACQUIS METH A1	PURCHASE			
COMMODITY			VENDOR DESC	Vendor Name	Mi	CARRIER
DEPT 0625	HEALTH DEPARTME	ACQUIS DATE 02/01/2017	TYPE	G		INSURED VAL 0.00
LOC CODE 254	HEALTH DEPT	ACQUIS COST 970.28	EXPIRE DATE			EXPIRE DATE
LOC MEMO		ACRES 0.000	ANNUAL COST	0.00		POLICY CST 0.00
ROOM		QTY 1	MEMO			MEMO
STORAGE LOC		UNIT PRICE 0.00				
		PURCH MEMO DELL				
STATUS A	ACTIVE		DEPRECIATE	Y		
CONDITION E	EXCELLENT	SOY BOOK 107.82	DEPREC PRIN		970.28	
CUSTODIAN	DEPT HEAD	CURRENT BOOK 0.00	FIRST YR/PR	2017/05	LAST YR/PR	2020/04
TITLEHOLDER		EST SALVAGE 0.00	EST LIFE	3		
		REPL COST 970.28	PERIODS TAKEN	36		
TAG # 09148		LAST INVENT	ACCUM DEPREC		970.28	
SERIAL # 2QSVVF2		IMPROVE MEMO				
MANUFACTURER	DELL DELL					
MODEL	LATITUDE E5470	RETIRE DATE				
MODEL YEAR		DISP CODE				
LICENSE #		DISP PRICE 0.00				
		SALE PRICE 0.00				

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98056	564000		100.00
5	DEPRECIATION EXPENSE	98056	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-160

DEPARTMENT: Health Department

TO BE COMPLETED BY DEPARTMENT:

Property Number: 9219 Mileage / Hours if applicable: _____

Year/Description: LATITUDE 5470 XCTO

Serial/Vin Number: B6FJ0G2 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

Surplus recycle out of date.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____


Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: _____ Indicate how and by whom: _____

Auction: _____ Where: _____ Amount Received: _____

Other: X Please describe: Recycling E-Scrap

Department Head Signature:  Date: 9/17/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20170169 Acquisition Cost: \$970.28

Acquisition Date: 04/26/2017 Book Value: -0-

Financial Services Signature:  Date: 9/25/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date: _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET # 20170169	MASTER ASSET			DESCRIPTION	LATITUDE E5470 XCTO			
CLASS 40	MACHINERY & EQU	FUND SOURCE	01	MAINT CONT	Y	INSURED	N	
SUBCL 116	COMPUTER	ACQUIS METH	A1 PURCHASE	VENDOR DESC	Vendor Name Mi	CARRIER		
COMMODITY		ACQUIS DATE	04/26/2017	TYPE	G	INSURED VAL	0.00	
DEPT 0625	HEALTH DEPARTME	ACQUIS COST	970.28	EXPIRE DATE		EXPIRE DATE		
LOC CODE 254	HEALTH DEPT	ACRES	0.000	ANNUAL COST	0.00	POLICY CST	0.00	
LOC MEMO		QTY	1	MEMO		MEMO		
ROOM		UNIT PRICE	0.00					
STORAGE LOC		PURCH MEMO	DELL					
STATUS A	ACTIVE			DEPRECIATE	Y			
CONDITION E	EXCELLENT	SOY BOOK	161.73	DEPREC PRIN		970.28		
CUSTODIAN	DEPT HEAD	CURRENT BOOK	0.00	FIRST YR/PR	2017/07	LAST YR/PR	2020/06	
TITLEHOLDER		EST SALVAGE	0.00	EST LIFE	3			
		REPL COST	970.28	PERIODS TAKEN	36			
TAG # 09219		LAST INVENT		ACCUM DEPREC		970.28		
SERIAL #	B6FJ0G2	IMPROVE MEMO						
MANUFACTURER	DELL DELL							
MODEL	LATITUDE E5470	RETIRE DATE						
MODEL YEAR		DISP CODE						
LICENSE #		DISP PRICE	0.00					
		SALE PRICE	0.00					

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98056	564000		100.00
5	DEPRECIATION EXPENSE	98056	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI #2020-166

DEPARTMENT: Health Department

TO BE COMPLETED BY DEPARTMENT:

Property Number: 8764 Mileage / Hours if applicable:

Year/Description: DELL LATITUDE 7350

Serial/Vin Number: 5PHYM72 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

Surplus recycle out of date.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: Indicate how and by whom:

Auction: Where: Amount Received:

Other: X Please describe: Recycling E-Scrap

Department Head Signature: [Signature] Date: 9/17/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20160100 Acquisition Cost: \$1,739.89

Acquisition Date: 03/07/2016 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/18/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

62-1

ASSET # 20160100	MASTER ASSET	DESCRIPTION	DELL	LATITUDE 7350	
CLASS 40	MACHINERY & EQU	FUND SOURCE	01		
SUBCL 116	COMPUTER	ACQUIS METH	A1	PURCHASE	
COMMODITY		MAINT CONT	Y	INSURED	N
DEPT 0624	ENVIRONMENTAL H	VENDOR DESC	Vendor Name Mi	CARRIER	
LOC CODE 255	ENVIRONMENTAL H	ACQUIS DATE	03/07/2016	INSURED VAL	0.00
LOC MEMO		ACQUIS COST	1,739.89	EXPIRE DATE	
ROOM		ACRES	0.000	ANNUAL COST	0.00
STORAGE LOC		QTY	1	POLICY CST	0.00
		UNIT PRICE	0.00	MEMO	
		PURCH MEMO	DELL		
STATUS A	ACTIVE				
CONDITION E	EXCELLENT	SOY BOOK	0.00	DEPRECIATE	Y
CUSTODIAN	DEPT HEAD	CURRENT BOOK	0.00	DEPREC PRIN	1,739.89
TITLEHOLDER		EST SALVAGE	0.00	FIRST YR/PR	2016/06
		REPL COST	1,739.89	LAST YR/PR	2019/05
TAG # 08764		LAST INVENT		EST LIFE	3
SERIAL # 5PHYM72		IMPROVE MEMO		PERIODS TAKEN	36
MANUFACTURER	DELL DELL			ACCUM DEPREC	1,739.89
MODEL	LATITUDE 7350	RETIRE DATE			
MODEL YEAR		DISP CODE			
LICENSE #		DISP PRICE	0.00		
		SALE PRICE	0.00		

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98056	564000		100.00
5	DEPRECIATION EXPENSE	98056	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI #2020-167

DEPARTMENT: Health Department

TO BE COMPLETED BY DEPARTMENT:

Property Number: 7636 Mileage / Hours if applicable: _____

Year/Description: OPTIPLEX 7010

Serial/Vin Number: 1RH9HX1 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

Surplus recycle out of date.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: _____ Indicate how and by whom: _____

Auction: _____ Where: _____ Amount Received: _____

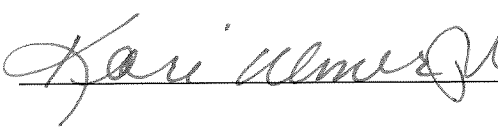
Other: Please describe: Recycling E-Scrap

Department Head Signature:  Date: 9/17/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20140096 Acquisition Cost: \$1,125.45

Acquisition Date: 06/19/2013 Book Value: -0-

Financial Services Signature:  Date: 9/28/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

626

ASSET # 20140096	MASTER ASSET	DESCRIPTION	OPTIPLEX 7010
CLASS 40 MACHINERY & EQU	FUND SOURCE 01	MAINT CONT	Y INSURED N
SUBCL 116 COMPUTER	ACQUIS METH A1 PURCHASE	VENDOR DESC	Vendor Name Mi CARRIER
COMMODITY		TYPE	G INSURED VAL 0.00
DEPT 0626 HEALTH DEPT-FER	ACQUIS DATE 06/19/2013	EXPIRE DATE	EXPIRE DATE
LOC CODE 250 HEALTH DEPT F.B	ACQUIS COST 1,125.45	ANNUAL COST	0.00 POLICY CST 0.00
LOC MEMO	ACRES 0.000	MEMO	MEMO
ROOM	QTY 1		
STORAGE LOC	UNIT PRICE 0.00		
	PURCH MEMO DELL		
STATUS A ACTIVE		DEPRECIATE	Y
CONDITION E EXCELLENT	SOY BOOK 0.02	DEPREC PRIN	1,125.45
CUSTODIAN DEPT HEAD	CURRENT BOOK 0.02	FIRST YR/PR	2013/09 LAST YR/PR 2016/08
TITLEHOLDER	EST SALVAGE 0.00	EST LIFE	3
	REPL COST 1,125.45	PERIODS TAKEN	36
TAG # 07636	LAST INVENT	ACCUM DEPREC	1,125.45
SERIAL # 1RH9HX1	IMPROVE MEMO		
MANUFACTURER DELL DELL			
MODEL OPTIPLEX 7010	RETIRE DATE		
MODEL YEAR	DISP CODE		
LICENSE #	DISP PRICE 0.00		
	SALE PRICE 0.00		

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98056	564000		100.00
5	DEPRECIATION EXPENSE	98056	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT

DELETION FROM INVENTORY FORM

DI # 2020-168

DEPARTMENT: Health Department

TO BE COMPLETED BY DEPARTMENT:

Property Number: 8650 Mileage / Hours if applicable:

Year/Description: DELL LATITUDE E6540

Serial/Vin Number: 49FZ262 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

Surplus recycle out of date.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: Indicate how and by whom:

Auction: Where: Amount Received:

Other: X Please describe: Recycling E-Scrap

Department Head Signature: [Signature] Date: 9/17/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20150857 Acquisition Cost: \$1,274.74

Acquisition Date: 09/25/2015 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/28/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date:

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

626

ASSET # 20150857	MASTER ASSET		DESCRIPTION		DELL LATITUDE E6540	
CLASS 40	MACHINERY & EQU	FUND SOURCE 01				
SUBCL 116	COMPUTER	ACQUIS METH A1	PURCHASE	MAINT CONT Y	INSURED	N
COMMODITY			VENDOR DESC	Vendor Name Mi	CARRIER	
DEPT 0626	HEALTH DEPT-FER	ACQUIS DATE 09/25/2015	TYPE G		INSURED VAL	0.00
LOC CODE 250	HEALTH DEPT F.B	ACQUIS COST 1,274.74	EXPIRE DATE		EXPIRE DATE	
LOC MEMO	ACRES	0.000	ANNUAL COST	0.00	POLICY CST	0.00
ROOM	QTY 1		MEMO		MEMO	
STORAGE LOC	UNIT PRICE	0.00				
	PURCH MEMO	DELL				
STATUS A	ACTIVE			DEPRECIATE Y		
CONDITION E	EXCELLENT	SOY BOOK	0.00	DEPREC PRIN	1,274.74	
CUSTODIAN	DEPT HEAD	CURRENT BOOK	0.00	FIRST YR/PR	2015/12	LAST YR/PR 2018/11
TITLEHOLDER		EST SALVAGE	0.00	EST LIFE	3	
		REPL COST	1,274.74	PERIODS TAKEN	36	
TAG # 08650	LAST INVENT			ACCUM DEPREC	1,274.74	
SERIAL # 49FZ262	IMPROVE MEMO					
MANUFACTURER	DELL DELL					
MODEL	E6540	RETIRE DATE				
MODEL YEAR		DISP CODE				
LICENSE #		DISP PRICE	0.00			
		SALE PRICE	0.00			

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98056	564000		100.00
5	DEPRECIATION EXPENSE	98056	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI #2020-169

DEPARTMENT: Health Department

TO BE COMPLETED BY DEPARTMENT:

Property Number: 8843 Mileage / Hours if applicable:

Year/Description: DELL LATITUDE E5470

Serial/Vin Number: 14J2R72 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

Surplus recycle out of date.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: Indicate how and by whom:

Auction: Where: Amount Received:

Other: X Please describe: Recycling E-Scrap

Department Head Signature: [Signature] Date: 9/17/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20160182 Acquisition Cost: \$970.28

Acquisition Date: 04/19/2016 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/28/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

ASSET # 20160182	MASTER ASSET	DESCRIPTION	DELL LATITUDE E5470
CLASS 40 MACHINERY & EQU	FUND SOURCE 01	MAINT CONT Y	INSURED N
SUBCL 116 COMPUTER	ACQUIS METH A1 PURCHASE	VENDOR DESC Vendor Name Mi	CARRIER
COMMODITY		TYPE G	INSURED VAL 0.00
DEPT 0626 HEALTH DEPT-FER	ACQUIS DATE 04/19/2016	EXPIRE DATE	EXPIRE DATE
LOC CODE 250 HEALTH DEPT F.B	ACQUIS COST 970.28	ANNUAL COST 0.00	POLICY CST 0.00
LOC MEMO	ACRES 0.000	MEMO	MEMO
ROOM	QTY 1		
STORAGE LOC	UNIT PRICE 0.00		
	PURCH MEMO DELL		
STATUS A ACTIVE		DEPRECIATE Y	
CONDITION E EXCELLENT	SOY BOOK 0.00	DEPREC PRIN 970.28	
CUSTODIAN DEPT HEAD	CURRENT BOOK 0.00	FIRST YR/PR 2016/07	LAST YR/PR 2019/06
TITLEHOLDER	EST SALVAGE 0.00	EST LIFE 3	
	REPL COST 970.28	PERIODS TAKEN 36	
TAG # 08843	LAST INVENT	ACCUM DEPREC 970.28	
SERIAL # 14J2R72	IMPROVE MEMO		
MANUFACTURER DELL DELL			
MODEL LATITUDE E5470	RETIRE DATE		
MODEL YEAR	DISP CODE		
LICENSE #	DISP PRICE 0.00		
	SALE PRICE 0.00		

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98056	564000		100.00
5	DEPRECIATION EXPENSE	98056	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI #2020-170

DEPARTMENT: Health Department

TO BE COMPLETED BY DEPARTMENT:

Property Number: 8765 Mileage / Hours if applicable:

Year/Description: DELL LATITUDE E6540

Serial/Vin Number: B771N72 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

Surplus recycle out of date.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: Indicate how and by whom:

Auction: Where: Amount Received:

Other: X Please describe: Recycling E-Scrap

Department Head Signature: [Signature] Date: 9/17/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20160101 Acquisition Cost: \$1,275.00

Acquisition Date: 03/07/2016 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/28/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

627

ASSET # 20160101	MASTER ASSET		DESCRIPTION	DELL LATITUDE E6540	
CLASS 40	MACHINERY & EQU	FUND SOURCE 01	MAINT CONT	Y	INSURED N
SUBCL 116	COMPUTER	ACQUIS METH A1	PURCHASE		
COMMODITY			VENDOR DESC	Vendor Name Mi	CARRIER
DEPT 0627	HEALTH DEPT-YUL	ACQUIS DATE 03/07/2016	TYPE	G	INSURED VAL 0.00
LOC CODE 251	HEALTH DEPT - Y	ACQUIS COST 1,275.00	EXPIRE DATE		EXPIRE DATE
LOC MEMO		ACRES 0.000	ANNUAL COST	0.00	POLICY CST 0.00
ROOM		QTY 1	MEMO		MEMO
STORAGE LOC		UNIT PRICE 0.00			
		PURCH MEMO DELL			
STATUS A	ACTIVE		DEPRECIATE	Y	
CONDITION E	EXCELLENT	SOY BOOK 0.00	DEPREC PRIN	1,275.00	
CUSTODIAN	DEPT HEAD	CURRENT BOOK 0.00	FIRST YR/PR	2016/06	LAST YR/PR 2019/05
TITLEHOLDER		EST SALVAGE 0.00	EST LIFE	3	
		REPL COST 1,275.00	PERIODS TAKEN	36	
TAG # 08765		LAST INVENT	ACCUM DEPREC	1,275.00	
SERIAL # B771N72		IMPROVE MEMO			
MANUFACTURER	DELL DELL				
MODEL	LATITUDE E6540	RETIRE DATE			
MODEL YEAR		DISP CODE			
LICENSE #		DISP PRICE 0.00			
		SALE PRICE 0.00			

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98056	564000		100.00
5	DEPRECIATION EXPENSE	98056	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI #2020-171

DEPARTMENT: Health Department

TO BE COMPLETED BY DEPARTMENT:

Property Number: 6840 Mileage / Hours if applicable:

Year/Description: DELL LAPTOP COMPUTER

Serial/Vin Number: 91XQYK1 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

Surplus recycle out of date.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: Indicate how and by whom:

Auction: Where: Amount Received:

Other: X Please describe: Recycling E-Scrap

Department Head Signature: [Signature] Date: 9/17/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20120037 Acquisition Cost: \$1,298.00

Acquisition Date: 10/13/2009 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/28/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

139

ASSET # 20120037	MASTER ASSET	DESCRIPTION	DELL LAPTOP COMPUTER
CLASS 40 MACHINERY & EQU	FUND SOURCE 02	MAINT CONT	Y INSURED N
SUBCL 116 COMPUTER	ACQUIS METH A1 PURCHASE	VENDOR DESC	Vendor Name Mi CARRIER
COMMODITY		TYPE	G INSURED VAL 0.00
DEPT 0629 HEALTH DEPT-HIL	ACQUIS DATE 10/13/2009	EXPIRE DATE	EXPIRE DATE
LOC CODE 253 HEALTH DEPT-HIL	ACQUIS COST 1,298.00	ANNUAL COST	0.00 POLICY CST 0.00
LOC MEMO	ACRES 0.000	MEMO	MEMO
ROOM	QTY 1		
STORAGE LOC	UNIT PRICE 0.00		
	PURCH MEMO		
STATUS A ACTIVE		DEPRECIATE	Y
CONDITION E EXCELLENT	SOY BOOK 0.07	DEPREC PRIN	1,298.00
CUSTODIAN DEPT HEAD	CURRENT BOOK 0.07	FIRST YR/PR	2012/04 LAST YR/PR 2015/03
TITLEHOLDER	EST SALVAGE 0.00	EST LIFE	3
	REPL COST 1,298.00	PERIODS TAKEN	36
TAG # 06840	LAST INVENT 10/13/2009	ACCUM DEPREC	1,298.00
SERIAL # 91XQYK1	IMPROVE MEMO		
MANUFACTURER DELL DELL			
MODEL	RETIRE DATE		
MODEL YEAR	DISP CODE		
LICENSE #	DISP PRICE 0.00		
	SALE PRICE 0.00		

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98056	564000		100.00
5	DEPRECIATION EXPENSE	98056	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI #2020-172

DEPARTMENT: Health Department

TO BE COMPLETED BY DEPARTMENT:

Property Number: 7644 Mileage / Hours if applicable:

Year/Description: DELL LATITUDE E6530

Serial/Vin Number: 3JZZNX1 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

Surplus recycle out of date.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: Indicate how and by whom:

Auction: Where: Amount Received:

Other: X Please describe: Recycling E-Scrap

Department Head Signature: [Signature] Date: 9/17/2020

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20140104 Acquisition Cost: \$1,103.25

Acquisition Date: 08/19/2013 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/28/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

627

ASSET # 20140104	MASTER ASSET	DESCRIPTION	DELL	LATITUDE	E6530
CLASS 40	MACHINERY & EQU	FUND SOURCE	01		
SUBCL 116	COMPUTER	ACQUIS METH	A1	PURCHASE	
COMMODITY		MAINT CONT	Y	INSURED	N
DEPT 0629	HEALTH DEPT-HIL	VENDOR DESC	Vendor Name Mi	CARRIER	
LOC CODE 253	HEALTH DEPT-HIL	ACQUIS DATE	08/19/2013	INSURED VAL	0.00
LOC MEMO		ACQUIS COST	1,103.25	EXPIRE DATE	
ROOM		ACRES	0.000	EXPIRE DATE	
STORAGE LOC		QTY	1	ANNUAL COST	0.00
		UNIT PRICE	0.00	POLICY CST	0.00
		PURCH MEMO	DELL	MEMO	
STATUS A	ACTIVE				
CONDITION E	EXCELLENT	SOY BOOK	0.05	DEPRECIATE	Y
CUSTODIAN	DEPT HEAD	CURRENT BOOK	0.05	DEPREC PRIN	1,103.25
TITLEHOLDER		EST SALVAGE	0.00	FIRST YR/PR	2013/11
		REPL COST	1,103.25	LAST YR/PR	2016/10
TAG # 07644		LAST INVENT		EST LIFE	3
SERIAL # 3JZZNX1		IMPROVE MEMO		PERIODS TAKEN	36
MANUFACTURER	DELL			ACCUM DEPREC	1,103.25
MODEL	LATITUDE E6530	RETIRE DATE			
MODEL YEAR		DISP CODE			
LICENSE #		DISP PRICE	0.00		
		SALE PRICE	0.00		

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98056	564000		100.00
5	DEPRECIATION EXPENSE	98056	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-173

DEPARTMENT: Road & Bridge

TO BE COMPLETED BY DEPARTMENT:

Property Number: 6785 Mileage / Hours if applicable: _____

Year/Description: 2011 Sun Prof. Pressure Washer

Serial/Vin Number: SEB4030 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

Damaged beyond repair. Replaced

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____


Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: X Indicate how and by whom: Take to Nassau County Solid Waste Department

Auction: _____ Where: _____ Amount Received: _____

Other: _____ Please describe: _____

Department Head Signature:  Date: 9-18-20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20110097 Acquisition Cost: \$2,320.00

Acquisition Date: 09/30/2011 Book Value: -0-

Financial Services Signature:  Date: 9/28/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____



09/28/2020 08:51
6235kulm

BOARD OF COMMISSIONERS
FIXED ASSET WORKSHEET

P 1
famstmt

ASSET # 20110097	CLASS 40	MACHINERY & EQU	MASTER ASSET	FUND SOURCE 01	DESCRIPTION	PRESSURE WASHER-SUN PROF. SEB4030			
SUBCL 510	PRESSURE WASHER	ACQUIS METH A1	PURCHASE		MAINT CONT Y		INSURED N		
COMMODITY					VENDOR DESC G	Vendor Name Mi	CARRIER		
DEPT 0410	ROAD & BRIDGE	ACQUIS DATE 09/30/2011			TYPE		INSURED VAL	0.00	
LOC CODE 270	ROAD & BRIDGE	ACQUIS COST 2,320.00			EXPIRE DATE		EXPIRE DATE		
LOC MEMO		ACRES 0.000			ANNUAL COST	0.00	POLICY CST	0.00	
ROOM		QTY 1			MEMO		MEMO		
STORAGE LOC		UNIT PRICE 0.00							
		PURCH MEMO	SUN PROFESSIONAL SUPPL						
STATUS A	ACTIVE				DEPRECIATE Y				
CONDITION E	EXCELLENT	SOY BOOK 444.73			DEPREC PRIN	2,320.00			
CUSTODIAN	DEPT HEAD	CURRENT BOOK 0.03			FIRST YR/PR	2011/12	LAST YR/PR	2020/10	
TITLEHOLDER		EST SALVAGE 0.00			EST LIFE 8				
		REPL COST 2,320.00			PERIODS TAKEN	107			
TAG # 06785		LAST INVENT			ACCUM DEPREC	2,320.00			
SERIAL # 11-08711		IMPROVE MEMO							
MANUFACTURER	SUN SUN								
MODEL SEB4030		RETIRE DATE							
MODEL YEAR 2011		DISP CODE							
LICENSE #		DISP PRICE 0.00							
		SALE PRICE 0.00							
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT				

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98054	564000		100.00
5	DEPRECIATION EXPENSE	98054	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI #2020-174

DEPARTMENT: Road & Bridge

TO BE COMPLETED BY DEPARTMENT:

Property Number: 7594 Mileage / Hours if applicable:

Year/Description: 2014 Dell Optiplex7010

Serial/Vin Number: FTR9L02 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

More cost efficient to replace because outdated, plus will not run Windows 10

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: X Indicate how and by whom: Take to Electronic Recycle bin at Nassau County Recycle Center

Auction: Where: Amount Received:

Other: Please describe:

Department Head Signature: [Signature] Date: 9-18-20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20140058 Acquisition Cost: \$799.25

Acquisition Date: 05/13/2014 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/18/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

ASSET # 20140058	MASTER ASSET	DESCRIPTION	OPTIPLEX 7010
CLASS 40 MACHINERY & EQU	FUND SOURCE 01		
SUBCL 116 COMPUTER	ACQUIS METH A1 PURCHASE	MAINT CONT Y	INSURED N
COMMODITY		VENDOR DESC Vendor Name Mi	CARRIER
DEPT 0410 ROAD & BRIDGE	ACQUIS DATE 05/13/2014	TYPE G	INSURED VAL 0.00
LOC CODE 270 ROAD & BRIDGE	ACQUIS COST 799.25	EXPIRE DATE	EXPIRE DATE
LOC MEMO	ACRES 0.000	ANNUAL COST 0.00	POLICY CST 0.00
ROOM	QTY 1	MEMO	MEMO
STORAGE LOC	UNIT PRICE 0.00		
	PURCH MEMO 03400541-564000 DELL		
STATUS A ACTIVE			
CONDITION E EXCELLENT	SOY BOOK 0.00	DEPRECIATE Y	
CUSTODIAN DEPT HEAD	CURRENT BOOK 0.00	DEPREC PRIN 799.25	
TITLEHOLDER	EST SALVAGE 0.00	FIRST YR/PR 2014/08	LAST YR/PR 2017/07
	REPL COST 799.25	EST LIFE 3	
TAG # 07594	LAST INVENT	PERIODS TAKEN 36	
SERIAL # FTR9L02	IMPROVE MEMO	ACCUM DEPREC 799.25	
MANUFACTURER DELL DELL			
MODEL OPTIPLEX 7010	RETIRE DATE		
MODEL YEAR	DISP CODE		
LICENSE #	DISP PRICE 0.00		
	SALE PRICE 0.00		

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98054	564000		100.00
5	DEPRECIATION EXPENSE	98054	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-175

DEPARTMENT: Road

TO BE COMPLETED BY DEPARTMENT:

Property Number: 1379 Mileage / Hours if applicable:

Year/Description: Bushing tool set

Serial/Vin Number: Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

See Missing or Lost Affidavit stating tool set obsolete with no current value and it was discarded

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: Indicate how and by whom:

Auction: Where: Amount Received:

Other: X Please describe: Scrapped

Department Head Signature: [Signature] Date: 9-18-20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20011814 Acquisition Cost: \$1,078.73

Acquisition Date: 08/21/2001 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/28/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

ASSET # 20011814	MASTER ASSET	RD 912	DESCRIPTION	BUSHING SET TOOL (TRANS. MAINT)		
	ADD'L DESC	SPX CORP				
		03491549-564000				
CLASS	40 MACHINERY & EQU	FUND SOURCE	01			
SUBCL	535 BUSHING SET TOO	ACQUIS METH	A1 PURCHASE	MAINT CONT	N	INSURED N
COMMODITY				VENDOR DESC	Vendor Name Mi	CARRIER
DEPT	0410 ROAD & BRIDGE	ACQUIS DATE	08/21/2001	TYPE	G	INSURED VAL 0.00
LOC CODE	270 ROAD & BRIDGE	ACQUIS COST	1,078.73	EXPIRE DATE		EXPIRE DATE
LOC MEMO		ACRES	0.000	ANNUAL COST	0.00	POLICY CST 0.00
ROOM		QTY		MEMO		MEMO
STORAGE LOC		UNIT PRICE	0.00			
		PURCH MEMO	SPX CORP 03491549-5640			
STATUS	A ACTIVE					
CONDITION	E EXCELLENT	SOY BOOK	0.00	DEPRECIATE	Y	
CUSTODIAN	TRANSPORTATION	CURRENT BOOK	0.00	DEPREC PRIN	1,078.73	
TITLEHOLDER		EST SALVAGE	0.00	FIRST YR/PR	2001/11	LAST YR/PR 2006/10
		REPL COST	1,078.73	EST LIFE	5	
TAG # 1379		LAST INVENT	06/24/2009	PERIODS TAKEN	60	
SERIAL #		IMPROVE MEMO		ACCUM DEPREC	1,078.73	
MANUFACTURER	BIG C BIG CAM					
MODEL		RETIRE DATE				
MODEL YEAR		DISP CODE				
LICENSE #		DISP PRICE				
		SALE PRICE	0.00			
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT	
4812	785	SIN91233963			1,078.73	

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98000	277110		100.00
5	DEPRECIATION EXPENSE	98054	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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Missing - Lost - Stolen Assets Affidavit

ASSET DESCRIPTION: Bushing tool set

ASSET TAG: 1379

ASSET NUMBER: 20011814

Items not located during the inventory process shall be promptly reported to the governmental unit which shall cause a thorough investigation to be made. If the investigation determines that the item was stolen, the individual property record shall be noted, and a report with the appropriate law enforcement agency describing the missing item and the circumstances surrounding its disappearance.

(Chapter 69I-73.006 (6)(b) Florida Administrative Code: Tangible Personal Property Owned by Local Governments

Check one of the following:

MISSING OR LOST

STOLEN

(Attach law enforcement report)

Explanation:

Tool Set Is obsolete and was
discarded by shop personnel. The toolset
was 18 yrs old and has no current value,
please delete. DHA
8-29-19

Department Head Signature

8-29-19

Date

County Manager Signature

9/13/20

Date

Received by Finance:

OK 8/17/20

Initial & Date

ASSET # 20011814	MASTER ASSET	RD 912	DESCRIPTION	BUSHING SET TOOL (TRANS. MAINT)		
	ADD'L DESC	SPX CORP				
		03491549-564000				
CLASS 40	MACHINERY & EQU	FUND SOURCE 01				
SUBCL 535	BUSHING SET TOO	ACQUIS METH A1	PURCHASE	MAINT CONT N	INSURED N	
COMMODITY				VENDOR DESC	Vendor Name Mi	CARRIER
DEPT 0410	ROAD & BRIDGE	ACQUIS DATE 08/21/2001		TYPE G		INSURED VAL 0.00
LOC CODE 270	ROAD & BRIDGE	ACQUIS COST 1,078.73		EXPIRE DATE		EXPIRE DATE
LOC MEMO		ACRES 0.000		ANNUAL COST	0.00	POLICY CST 0.00
ROOM		QTY		MEMO		MEMO
STORAGE LOC		UNIT PRICE 0.00				
		PURCH MEMO SPX CORP 03491549-5640				
STATUS A	ACTIVE					
CONDITION E	EXCELLENT	SOY BOOK 0.00	DEPRECIATE Y			
CUSTODIAN	TRANSPORTATION	CURRENT BOOK 0.00	DEPREC PRIN 1,078.73			
TITLEHOLDER		EST SALVAGE 0.00	FIRST YR/PR 2001/11	LAST YR/PR	2006/10	
		REPL COST 1,078.73	EST LIFE 5			
TAG # 1379		LAST INVENT 06/24/2009	PERIODS TAKEN 60			
SERIAL #		IMPROVE MEMO	ACCUM DEPREC 1,078.73			
MANUFACTURER	BIG C BIG CAM					
MODEL		RETIRE DATE				
MODEL YEAR		DISP CODE				
LICENSE #		DISP PRICE				
		SALE PRICE 0.00				
VEND # 4812	PO # 785	DOCUMENT # SIN91233963	INVOICE #	INV DATE	INV AMT	1,078.73

G/L Accounts

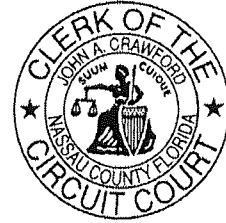
TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98000	277110		100.00
5	DEPRECIATION EXPENSE	98054	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

FO Accounts

ORG	OBJ	PROJ	AMOUNT
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John A. Crawford
Clerk of the Circuit Court
Nassau County



MEMORANDUM

To: Mike Mullin, County Manager

From: Kari Ulmer, Clerk Financial Services

Date: 8/10/20

Re: Missing-Lost Asset

CLERK OF THE
CIRCUIT COURT
FINANCIAL SERVICES
NASSAU COUNTY, FL

2020 AUG 11 11.37

RECEIVED

Please approve the attached Missing-Lost-Stolen Asset Affidavit(s) and forward back to Financial Services.

Thank you

DELETION FROM INVENTORY FORM

DI # 2020-176

DEPARTMENT: Road & Bridge

TO BE COMPLETED BY DEPARTMENT:

Property Number: 1487 Mileage / Hours if applicable: _____

Year/Description: 2002 48" Digging Bucket for John Deere Excavator

Serial/Vin Number: GEITH102262 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): _____

Part of the trade in with Excavator #1204 for the FRP

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____


Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: _____ Indicate how and by whom: _____

Auction: _____ Where: _____ Amount Received: _____

Other: _____ Please describe: _____

Department Head Signature:  Date: 9-18-20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20020191 Acquisition Cost: \$5,831.00

Acquisition Date: 08/27/2002 Book Value: -0-

Financial Services Signature:  Date: 9/28/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET # 20020191	MASTER ASSET	RD 932	DESCRIPTION	48" DIGGING BUCKET #1203		
	ADD'L DESC	W/TEETH & SIDE CUTTERS FOR JOHN DEERE 892 EXC.W/D-RINGS & ANTI-CLATTER ATTACHMENT FOR #1203 EXCAVATOR				
CLASS	40 MACHINERY & EQU	FUND SOURCE	01			
SUBCL	574 BUCKET	ACQUIS METH	A1 PURCHASE	MAINT CONT	N	INSURED N
COMMODITY				VENDOR DESC	Vendor Name Mi	CARRIER
DEPT	0410 ROAD & BRIDGE	ACQUIS DATE	08/27/2002	TYPE	G	INSURED VAL 0.00
LOC CODE	270 ROAD & BRIDGE	ACQUIS COST	5,831.00	EXPIRE DATE		EXPIRE DATE
LOC MEMO		ACRES	0.000	ANNUAL COST	0.00	POLICY CST 0.00
ROOM		QTY		MEMO		MEMO
STORAGE LOC		UNIT PRICE	0.00			
		PURCH MEMO	M D MOODY 03404541-564			
STATUS	A ACTIVE					
CONDITION	E EXCELLENT	SOY BOOK	0.12	DEPRECIATE	Y	
CUSTODIAN	TRANSPORTATION	CURRENT BOOK	0.12	DEPREC PRIN		5,831.00
TITLEHOLDER		EST SALVAGE	0.00	FIRST YR/PR	2002/11	LAST YR/PR 2017/10
		REPL COST	5,831.00	EST LIFE	15	
TAG # 1487		LAST INVENT	06/24/2009	PERIODS TAKEN	180	
SERIAL # 102262		IMPROVE MEMO		ACCUM DEPREC		5,831.00
MANUFACTURER	GEITH GEITH, INC					
MODEL	HD58 BKT	RETIRE DATE				
MODEL YEAR		DISP CODE				
LICENSE #		DISP PRICE				
		SALE PRICE	0.00			
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT	
324	2000817	5056101	5056101	08/27/2002	5,831.00	

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98000	277110		100.00
5	DEPRECIATION EXPENSE	98054	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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Ring Power Corporation
 500 World Commerce Parkway
 St Augustine, FL 32092
 (904) 737-7730

Sign up for On-line Invoice Access:
 www.ringpower.com/web-invoice

RING POWER CORPORATION 500 WORLD COMMERCE PKWY, ST AUGUSTINE, FL 32092, (904) 737-7730

INVOICE

S NASSAU COUNTY BOARD OF
 O COUNTY COMMISSIONERS
 L 76347 VETERANS WAY #4000
 D YULEE FL 32097

S 37356 PEA FARM RD
 H HILLIARD, FL
 I
 P
 T SALESMEN: J MINCY/J LUSK
 O

FLEET RECEIVED
 MAR 10 2020
 MANAGEMENT

Veh # RDO 1210

INVOICE NUMBER	INVOICE DATE	SHIP VIA	DATE SHIPPED	CUSTOMER'S P.O.#	ACCOUNT NUMBER	PAGE
03SR05666423	03-06-20	RPC TRANSPORT	03-06-20	20000318-00	759864	1
QUANTITY	I.D.# & SERIAL #	DESCRIPTION			AMOUNT	

CUSTOMER CONTACT: DAVID HEARN
 TAX EXEMPTION LICENSE 858012559204C5

TERMS: NET 10 DAYS

CATERPILLAR MODEL 308
 ID NO: GG801883 SERIAL NO: GG801883
 308 CRSB MINI HYDRAULIC EXCAVATOR,
 CR MHE DCA8A, ECOLOGY DRAIN, WATER JACKET HEATER,
 AIR SUSP, FABRIC, HEATED SEAT, 3" RETRACTABLE SEAT
 BELT, TRAVEL ALARM, STANDARD LIGHTS, RADIO,
 CELLULAR PLE642 PRODUCT LINK, REAR VIEW CAMERA,
 C3.3 HRC ELECTRICAL ARR, SWING BOOM, BOOM LINES,
 CONFIG HYDRAULIC THUMB, MANUAL COUPLER, 36" BUCKET
 54" DITCH CLEANING BUCKET, BUCKET PINS

1.0

113496.00

 5 YEAR/5000 HOUR PREMIER WARRANTY

 TRADE IN 120C JOHN DEERE SN:35735
 *****KG

1.0
 1.0
 1.0

20000.00-

..... THANK YOU FOR YOUR BUSINESS!

[Signature]
 APPROVED: FLEET MANAGEMENT

CCT. #: 03404541-564002 FPA
 DATE RECEIVED: 3/18/20
 DATE PROCESSED: 3/11/2020
 8

A SERVICE CHARGE OF 1 1/2 % PER MONTH WILL BE CHARGED ON PAST DUE ACCOUNTS.

Title to the equipment listed hereon shall not pass to the purchaser until the purchase price (including all taxes) has been paid, but such title remain vested in the seller until all sums due or to become due from the purchaser to the seller thereon, whether evidenced by note, book account, judgment, or otherwise, shall have been fully paid, at which time ownership shall pass to the purchaser. Purchaser shall assume all liability of damage or destruction to same. At any time after any payment thereon becomes overdue seller may avail himself of any legal remedy including the right to repossess the equipment without notice.

Remit to:
 Ring Power Corporation
 PO Box 935004
 Atlanta, GA 31193-5004

PAY THIS AMOUNT
93496.00

TERMS ARE CASH UNLESS CREDIT IS APPROVED. With CREDIT APPROVAL terms are as follows: Parts and Service invoices are due net 30 days from the date of the invoice. Rental/Lease invoices are due upon receipt. Sales invoices are due net 10 days from the date of invoice. Past due balances shall be assessed a service charge or interest at the highest rate allowed by law until payment is made. The past due balance represents all charges remaining unpaid on the closing date of the month following invoice date. In the event of default in the payment of any amount due, the purchaser agrees to pay finance charges and the cost of collection. Acceptance by customer of the parts, service or equipment listed above is the customer's agreement to be bound by the credit and collection terms set forth above, the terms of the Application for Credit and if applicable the terms of the Guaranty of Payment.

ASSET # 20060047 ✓
 CLASS 40 MACHINERY & EQU FUND SOURCE 01
 SUBCL 578 HYDRAULIC EXCAV ACQUIS METH A1 PURCHASE
 COMMODITY
 DEPT 0410 ROAD & BRIDGE ACQUIS DATE 02/07/2006
 LOC CODE 305 HILLIARD YARD ACQUIS COST 118,885.00
 LOC MEMO ACRES 0.000
 ROOM QTY 1
 STORAGE LOC UNIT PRICE 0.00
 PURCH MEMO INDUSTRIAL 03404541-56
 STATUS A ACTIVE
 CONDITION E EXCELLENT SOY BOOK 0.02
 CUSTODIAN DEPT HEAD CURRENT BOOK 0.02
 TITLEHOLDER EST SALVAGE 0.00
 TAG # 3542 ✓ REPL COST 118,885.00
 SERIAL # FF120CX035735 ✓ LAST INVENT 06/24/2009
 MANUFACTURER DEERE DEERE IMPROVE MEMO
 MODEL 120C RETIRE DATE
 MODEL YEAR DISP CODE
 LICENSE # DISP PRICE 0.00
 SALE PRICE 0.00

DESCRIPTION CN#RB1204 HYDRAULIC EXCAVATOR
 MAINT CONT Y INSURED N
 VENDOR DESC Vendor Name Mi CARRIER
 TYPE G INSURED VAL 0.00
 EXPIRE DATE EXPIRE DATE
 ANNUAL COST 0.00 POLICY CST 0.00
 MEMO MEMO
 DEPRECIATE Y
 DEPREC PRIN 118,885.00
 FIRST YR/PR 2006/05 LAST YR/PR 2014/04
 EST LIFE 8
 PERIODS TAKEN 96
 ACCUM DEPREC 118,885.00

VEND # PO # DOCUMENT # INVOICE # INV DATE INV AMT
 293 6000077 13106 13106 02/07/2006 118,885.00

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98000	277110		100.00
5	DEPRECIATION EXPENSE	98054	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
-----	-----	------	--------

Copy

DELETION FROM INVENTORY FORM

DI# _____

DEPARTMENT: Road and Bridge Department

TO BE COMPLETED BY DEPARTMENT:

Property Number: Tag# 3542 - R&B 1204 Mileage / Hours if applicable: 5368 hours

Year/Description: 2006 John Deere Hydraulic Excavator

Serial/Vin Number: FF120CX035735 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): For trade in of a new

Caterpillar 308E2

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: X (Please include trade-in documents) _____

Destroy: _____ Indicate how and by whom: _____

Auction: _____ Where: _____ Amount Received: _____

Other: _____ Please describe: _____

Department Head Signature: _____ Date: _____

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: _____ Acquisition Cost: _____

Acquisition Date: _____ Book Value: _____

Financial Services Signature: _____ Date: _____

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

7/15/19

DELETION FROM INVENTORY FORM

DI #2020-177

DEPARTMENT: Facilities Maintenance/Parks & Recreation Dep

TO BE COMPLETED BY DEPARTMENT:

Property Number: Asset# 201400072 Tag 7610 Mileage / Hours if applicable:

Year/Description: 2014 CISCO CAT 2960 24 Port Switch

Serial/Vin Number: SF0C1810Z01C Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

Switch failed and was replaced by Tag # 09327 which is on the Judicial Inventory; it was purchased by Conni Lewis with

Grant in Aid Funds. (Per Bill Howard 9/8/20)

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: Indicate how and by whom:

Auction: Where: Amount Received:

Other: X Please describe: Vendor removed during repairs.

Department Head Signature: [Signature] Date: 9-24-2020

Doug Podiak - Public Works Director

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20140072 Acquisition Cost: \$1,191.68

Acquisition Date: 06/10/2014 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/28/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date:

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

RECEIVED
24 SEP 24 PM 4:09

ASSET # 20140072	MASTER ASSET			DESCRIPTION	CISCO CAT 2960 24 PORT SWITCH			
CLASS 40	MACHINERY & EQU	FUND SOURCE	01	MAINT CONT	Y	INSURED	N	
SUBCL 599	SWITCH	ACQUIS METH	A1 PURCHASE	VENDOR DESC	Vendor Name Mi	CARRIER		
COMMODITY		ACQUIS DATE	06/10/2014	TYPE	G	INSURED VAL		0.00
DEPT 0191	FACILITIES MAIN	ACQUIS COST	1,191.68	EXPIRE DATE		EXPIRE DATE		
LOC CODE 224	ROBERT M FOSTER	ACRES	0.000	ANNUAL COST	0.00	POLICY CST		0.00
LOC MEMO		QTY	1	MEMO		MEMO		
ROOM		UNIT PRICE	0.00					
STORAGE LOC		PURCH MEMO	01074712-564000-GIA08					
STATUS A	ACTIVE			DEPRECIATE	Y			
CONDITION E	EXCELLENT	SOY BOOK	0.00	DEPREC PRIN		1,191.68		
CUSTODIAN	DEPT HEAD	CURRENT BOOK	0.00	FIRST YR/PR	2014/09	LAST YR/PR	2019/08	
TITLEHOLDER		EST SALVAGE	0.00	EST LIFE	5			
		REPL COST	1,191.68	PERIODS TAKEN	60			
TAG # 07610		LAST INVENT		ACCUM DEPREC		1,191.68		
SERIAL #	SFOC1810Z01C	IMPROVE MEMO						
MANUFACTURER	CISCO CISCO							
MODEL	2960-X	RETIRE DATE						
MODEL YEAR		DISP CODE						
LICENSE #		DISP PRICE	0.00					
		SALE PRICE	0.00					
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT			

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98051	564000		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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7610

Suzie Fontes

From: Bill Howard
Sent: Tuesday, September 08, 2020 11:44 AM
To: Suzie Fontes
Subject: RE: 7610 Tag #

The 09327 is a judicial Number that was purchased when Conni Lewis was still here with Grant In Aid Funds. So It should be currently on the Judicial Inventory.

Bill Howard - Facilities Supervisor
Nassau County Facilities Maintenance Department
904-548-4969 office
904-548-4509 fax
904-753-0373 cell
email - bhoward@nassaucountyfl.com

Under Florida law, e-mail addresses are public records. If you do not want your e-mail address released in response to a public records request, please do not send electronic mail to this entity. Instead, please contact this office by phone or in writing.

From: Suzie Fontes
Sent: Tuesday, September 08, 2020 11:30 AM
To: Bill Howard
Subject: 7610 Tag #

Bill,
On the inventory report you noted that this item was replaced by tag# 09327 Cisco Switch, Can you verify that number for me I don't have it on my list. Is this on someone else inventory?

Suzie Fontes, Office Manager
Nassau County Facilities Maintenance/Parks & Recreation Dept.
Office: 904-530-6122
Main Office: 904-530-6120
45195 Musselwhite Road
Callahan, Florida 32011

Under Florida law, e-mail addresses are public records. If you do not want your e-mail address released in response to a public records request, please do not send electronic mail to this entity. Instead, please contact this office by phone or in writing.

Date**VCR Report**

NAME	Veh #	
<u>Vacant - Dump Truck</u>	002	_____
<u>Castle, Donald</u>	007	_____
<u>Holmberg, John</u>	12	_____
<u>Stonebreaker, William</u>	22	_____
<u>Burnsed, Leslie</u>	96	_____
<u>York, Monty</u>	98	_____
<u>Barnes, Daniel</u>	100	_____
<u>Sprole, Dave</u>	103	_____
<u>Little, Jeffery</u>	104	_____
<u>White, David</u>	105	_____
<u>Jones, Jason</u>	106	_____
<u>Powell, Joshua</u>	107	_____
<u>Mellecker, David</u>	108	_____
<u>Nordeng, Joe</u>	113	_____
<u>Elliott, Julie</u>	114	_____
<u>Vacant - Pick-up</u>	118	_____
<u>Howard, William</u>	125	_____
<u>Jones, Reggie</u>	202	_____
<u>Crews, David</u>	203	_____
<u>Moody, George</u>	205	_____
<u>Mason, Craig</u>	214	_____
<u>Lombardi, Tony</u>	216	_____
<u>Conley, Tamala</u>		_____
<u>Fontes, Suzanne</u>		_____
<u>Mellecker, Michelle</u>		_____
<u>Steeple, Kenneth</u>		_____
<u>Tedder, Henry</u>		_____

Emailed Hari



08/07/2020 10:38
6235kuilm

BOARD OF COMMISSIONERS
2020 INVENTORY

P 5
faloclst

FACILITIES MAINTENANCE

DEPT ROOM	TAG # ASSET #	SUB CLASS DESCRIPTION	MANUF SERIAL #	CUSTODIAN	QTY	ACQUIS DATE EST LIFE	ACQUIS COST CURR BOOK	REPLACE COST	REMARKS STATUS CAPITALIZE?
0191	TAG NUMBER: 07292 07292 20130247	TRUCK CN#FMD125 2013	CHEVR1GCNCPEX6 DZ328519	DEPT HEAD	1	05/14/2013 5	19,181.10 .01	19,181.10	<i>X</i> Tag missing due to door via vertical replacement ACTIVE Y
0191	TAG NUMBER: 07607 07607 20140069	COMPUTER OPTIPLEX 7010	DELL G6GJM02	DEPT HEAD	1	06/10/2014 3	799.25 .00	799.25	<i>in Bill Software</i> 799.25 Replaced Joe Reye ACTIVE Y
0191	TAG NUMBER: 07609 07609 20140071	FIRE WALL CISCO ASA 5505	CISCOSJMX181540AU	DEPT HEAD	1	06/10/2014 3	1,019.00 .06	1,019.00	Sticker missing ACTIVE Y
0191	TAG NUMBER: 07610 07610 20140072	SWITCH CISCO CAT 2960 24 PORT SWITCH	CISCOSFOC1810Z01C	DEPT HEAD	1	06/10/2014 5	1,191.68 .00	1,191.68	<i>Unintentional</i> Replaced by John Controls ACTIVE Y new number for sticker missing Stock # 0432
0191	TAG NUMBER: 07759 07759 20140221	MONITOR 21.5IN FLAT PANEL JUDICIAL ANNEX CAMERA UPGRADE	VICON20153	DEPT HEAD	1	09/30/2014 5	1,331.57 .00	1,331.57	ACTIVE Y
0191	TAG NUMBER: 07760 07760 20140222	MONITOR 21.5IN FLAT PANEL JUDICIAL ANNEX CAMERA UPGRADE	VICON20149	DEPT HEAD	1	09/30/2014 5	1,331.57 .00	1,331.57	ACTIVE Y
0191	TAG NUMBER: 07761 07761 20140223	MONITOR 21.5IN FLAT PANEL JUDICIAL ANNEX CAMERA UPGRADE	VICON20152	DEPT HEAD	1	09/30/2014 5	1,331.57 .00	1,331.57	ACTIVE Y
0191	TAG NUMBER: 07762 07762 20140224	MONITOR 21.5IN FLAT PANEL JUDICIAL ANNEX CAMERA UPGRADE	VICON20144	DEPT HEAD	1	09/30/2014 5	1,331.57 .00	1,331.57	ACTIVE Y
0191	TAG NUMBER: 07763 07763 20140225	MONITOR 21.5IN FLAT PANEL JUDICIAL ANNEX CAMERA UPGRADE	VICON20142	DEPT HEAD	1	09/30/2014 5	1,331.57 .00	1,331.57	ACTIVE Y

TAG NUMBER: 07764

07/15/2016 10:35
6235kulm

BOARD OF COMMISSIONERS
FIXED ASSET WORKSHEET

P 1
famstmnt

ASSET # 20140072	MASTER ASSET	DESCRIPTION	CISCO CAT 2960 24 PORT SWITCH		
CLASS 40 MACHINERY & EQU	FUND SOURCE 01	MAINT CONT Y	INSURED N		
SUBCL 599 SWITCH	ACQUIS METH A1 PURCHASE	VENDOR DESC Vendor Name Mi	CARRIER		
COMMODITY		TYPE G	INSURED VAL 0.00		
DEPT 0191 FACILITIES MAIN	ACQUIS DATE 06/10/2014	EXP. DATE	EXP. DATE		
LOC CODE 224 ROBERT M FOSTER	ACQUIS COST 1,191.68	ANNUAL COST 0.00	POLICY CST 0.00		
LOC MEMO	ACRES 0.000	MEMO	MEMO		
ROOM	QTY 1				
STORAGE LOC	UNIT PRICE 0.00				
	PURCH MEMO 01074712-564000-GIA08				
STATUS A ACTIVE		DEPRECIATE Y			
CONDITION E EXCELLENT	SOY BOOK 873.92	DEPREC PRIN 1,191.68			
CUSTODIAN DEPT HEAD	CURRENT BOOK 715.04	FIRST YR/PR 2014/09	LAST YR/PR 2016/08		
TITLEHOLDER	EST SALVAGE 0.00	EST LIFE 5			
	REPL COST 1,191.68	PERIODS TAKEN 24			
TAG # 07610	LAST INVENT	ACCUM DEPREC 476.64			
SERIAL # SFOC1810Z01C	IMPROVE MEMO				
MANUFACTURER CISCO CISCO					
MODEL 2960-X	RETIRE DATE				
MODEL YEAR	DISP CODE				
LICENSE #	DISP PRICE 0.00				
	SALE PRICE 0.00				
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98051	564000		100.00
5	DEPRECIATION EXPENSE	98051	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-178

DEPARTMENT: Fire Rescue

TO BE COMPLETED BY DEPARTMENT:

Property Number: 1959 Mileage / Hours if applicable:

Year/Description: Life Pak 12 Battery Back up

Serial/Vin Number: PHYS114251566 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): Item was sent in with Life Pak 12 unit when trade in of Life Pak 12's occurred.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: X Indicate how and by whom: Stryker

Auction: Where: Amount Received:

Other: Please describe:

Department Head Signature: [Signature] Date: 9-22-20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20020018 Acquisition Cost: \$1,326.00

Acquisition Date: 05/09/2002 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/28/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

ASSET # 20020018	MASTER ASSET ES 793	DESCRIPTION BATTERY BACKUP
	ADD'L DESC LIFE PAK 12	
CLASS 40 MACHINERY & EQU	FUND SOURCE 01	
SUBCL 139 BATTERY BACKUP	ACQUIS METH A1 PURCHASE	MAINT CONT N INSURED N
COMMODITY		VENDOR DESC Vendor Name Mi CARRIER
DEPT 0261 RESCUE	ACQUIS DATE 05/09/2002	TYPE G INSURED VAL 0.00
LOC CODE 522 STATION 90	ACQUIS COST 1,326.00	EXPIRE DATE EXPIRE DATE
LOC MEMO STATION 90	ACRES 0.000	ANNUAL COST 0.00 POLICY CST 0.00
ROOM	QTY	MEMO MEMO
STORAGE LOC	UNIT PRICE 0.00	
	PURCH MEMO MEDTRONIC 01261526-564	
STATUS A ACTIVE		
CONDITION E EXCELLENT	SOY BOOK 0.00	DEPRECIATE Y
CUSTODIAN PUBLIC SAFETY	CURRENT BOOK 0.00	DEPREC PRIN 1,326.00
TITLEHOLDER	EST SALVAGE 0.00	FIRST YR/PR 2002/08 LAST YR/PR 2007/07
	REPL COST 1,326.00	EST LIFE 5
TAG # 1959	LAST INVENT 07/13/2009	PERIODS TAKEN 60
SERIAL # 14251566	IMPROVE MEMO	ACCUM DEPREC 1,326.00
MANUFACTURER PHYSI PHYSIO C		
MODEL 99407-000002	RETIRE DATE	
MODEL YEAR	DISP CODE	
LICENSE #	DISP PRICE	
	SALE PRICE 0.00	
VEND # 188	PO # 2000572	DOCUMENT # IV939872
	INVOICE # IV939872	INVOICE # IV939872
	INV DATE 05/23/2002	INV DATE 05/23/2002
		INV AMT 106,795.00

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98000	277101		100.00
5	DEPRECIATION EXPENSE	98052	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI #2020-179

DEPARTMENT: Fire Rescue

TO BE COMPLETED BY DEPARTMENT:

Property Number: 1979 Mileage / Hours if applicable:

Year/Description: Life Pak 12 Battery Back up

Serial/Vin Number: PHYSH14254415 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): Item was sent in with Life Pak 12 unit when trade in of Life Pak 12's occurred.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: X Indicate how and by whom: Stryker

Auction: Where: Amount Received:

Other: Please describe:

Department Head Signature: [Signature] Date: 9-22-20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20020021 Acquisition Cost: \$1,326.00

Acquisition Date: 05/09/2002 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/28/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date:

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

ASSET # 20020021	MASTER ASSET	ES 796	DESCRIPTION	BATTERY BACKUP	
CLASS 40	MACHINERY & EQU	FUND SOURCE 01			
SUBCL 139	BATTERY BACKUP	ACQUIS METH A1	MAINT CONT	N	INSURED N
COMMODITY			VENDOR DESC	Vendor Name Mi	CARRIER
DEPT 0261	RESCUE	ACQUIS DATE 05/09/2002	TYPE	G	INSURED VAL 0.00
LOC CODE 542	FIRE STATION #7	ACQUIS COST 1,326.00	EXPIRE DATE		EXPIRE DATE
LOC MEMO		ACRES 0.000	ANNUAL COST	0.00	POLICY CST 0.00
ROOM		QTY	MEMO		MEMO
STORAGE LOC		UNIT PRICE 0.00			
		PURCH MEMO	MEDTRONIC	01261526-56	
STATUS	A ACTIVE				
CONDITION	E EXCELLENT	SOY BOOK 0.00	DEPRECIATE	Y	
CUSTODIAN	PUBLIC SAFETY	CURRENT BOOK 0.00	DEPREC PRIN		1,326.00
TITLEHOLDER		EST SALVAGE 0.00	FIRST YR/PR	2002/08	LAST YR/PR 2007/07
		REPL COST 1,326.00	EST LIFE	5	
TAG # 1979		LAST INVENT 07/13/2009	PERIODS TAKEN	60	
SERIAL # 14254415		IMPROVE MEMO	ACCUM DEPREC		1,326.00
MANUFACTURER	PHYSI PHYSIO C				
MODEL	99407-000002	RETIRE DATE			
MODEL YEAR		DISP CODE			
LICENSE #		DISP PRICE			
		SALE PRICE 0.00			
VEND # 188	PO # 2000572	DOCUMENT # IV939872	INVOICE # IV939872	INV DATE 05/23/2002	INV AMT 106,795.00

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98000	277101		100.00
5	DEPRECIATION EXPENSE	98052	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI # 2020-180

DEPARTMENT: Fire Rescue

TO BE COMPLETED BY DEPARTMENT:

Property Number: 1898 Mileage / Hours if applicable:

Year/Description: Life Pak 12 Battery Back up

Serial/Vin Number: PHYSI14251562 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): Item was sent in with Life Pak 12 unit when trade in of Life Pak 12's occurred.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: X Indicate how and by whom: Stryker

Auction: Where: Amount Received:

Other: Please describe:

Department Head Signature: [Signature] Date: 9-22-20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20020016 Acquisition Cost: \$1,326.00

Acquisition Date: 05/09/2002 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/28/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

ASSET #	20020016	MASTER ASSET	ES 791	DESCRIPTION	BATTERY BACKUP			
		ADD'L DESC	LIFE PAK 12					
CLASS	40	MACHINERY & EQU	FUND SOURCE	01				
SUBCL	139	BATTERY BACKUP	ACQUIS METH	A1 PURCHASE	MAINT CONT	N	INSURED	N
COMMODITY					VENDOR DESC	Vendor Name Mi	CARRIER	
DEPT	0261	RESCUE	ACQUIS DATE	05/09/2002	TYPE	G	INSURED VAL	0.00
LOC CODE	549	STATION 20 F.B.	ACQUIS COST	1,326.00	EXPIRE DATE		EXPIRE DATE	
LOC MEMO			ACRES	0.000	ANNUAL COST	0.00	POLICY CST	0.00
ROOM			QTY		MEMO		MEMO	
STORAGE LOC			UNIT PRICE	0.00				
			PURCH MEMO	MEDTRONICS 01261526-56				
STATUS	A	ACTIVE						
CONDITION	E	EXCELLENT	SOY BOOK	0.00	DEPRECIATE	Y		
CUSTODIAN		PUBLIC SAFETY	CURRENT BOOK	0.00	DEPREC PRIN		1,326.00	
TITLEHOLDER			EST SALVAGE	0.00	FIRST YR/PR	2002/08	LAST YR/PR	2007/07
			REPL COST	1,326.00	EST LIFE	5		
TAG #	1898		LAST INVENT	07/13/2009	PERIODS TAKEN	60		
SERIAL #	14251562		IMPROVE MEMO		ACCUM DEPREC	1,326.00		
MANUFACTURER	PHYSI	PHYSIO C						
MODEL	99407-000002		RETIRE DATE					
MODEL YEAR			DISP CODE					
LICENSE #			DISP PRICE					
			SALE PRICE	0.00				
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT			
188	2000572	IV939872	IV939872	05/23/2002	106,795.00			

G/L Accounts

TYPE	DESC	ORG	OBJ	PERCENT
1	ASSET	98000	166900	100.00
2	CONTRA	98000	277101	100.00
5	DEPRECIATION EXPENSE	98052	559000	100.00
6	ACCUMULATED DEPRECIATION	98000	167900	100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT

DELETION FROM INVENTORY FORM

DI # 2020-181

DEPARTMENT: Fire Rescue

TO BE COMPLETED BY DEPARTMENT:

Property Number: 1941 Mileage / Hours if applicable: _____

Year/Description: Life Pak 12 Battery Back up

Serial/Vin Number: PHYSI14254416 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): Item was sent in with
with Life Pak 12 unit when trade in of Life Pak 12's occurred.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: X Indicate how and by whom: Stryker

Auction: _____ Where: _____ Amount Received: _____

Other: _____ Please describe: _____

Department Head Signature: *[Signature]* Date: 9-22-20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20020020 Acquisition Cost: \$1,326.00

Acquisition Date: 05/09/2002 Book Value: -0-

Financial Services Signature: *[Signature]* Date: 9/28/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET # 20020020	MASTER ASSET	ES 795	DESCRIPTION	BATTERY BACKUP	
CLASS 40	MACHINERY & EQU	FUND SOURCE 01			
SUBCL 139	BATTERY BACKUP	ACQUIS METH A1	MAINT CONT	N	INSURED N
COMMODITY			VENDOR DESC	Vendor Name Mi	CARRIER
DEPT 0261	RESCUE	ACQUIS DATE 05/09/2002	TYPE	G	INSURED VAL 0.00
LOC CODE 554	STATION 60	ACQUIS COST 1,326.00	EXPIRE DATE		EXPIRE DATE
LOC MEMO		ACRES 0.000	ANNUAL COST	0.00	POLICY CST 0.00
ROOM		QTY	MEMO		MEMO
STORAGE LOC		UNIT PRICE 0.00			
		PURCH MEMO	MEDTRONIC	01261526-56	
STATUS	A ACTIVE				
CONDITION	E EXCELLENT	SOY BOOK 0.00	DEPRECIATE	Y	
CUSTODIAN	PUBLIC SAFETY	CURRENT BOOK 0.00	DEPREC PRIN	1,326.00	
TITLEHOLDER		EST SALVAGE 0.00	FIRST YR/PR	2002/08	LAST YR/PR 2007/07
		REPL COST 1,326.00	EST LIFE	5	
TAG # 1941		LAST INVENT 07/13/2009	PERIODS TAKEN	60	
SERIAL # 14254416		IMPROVE MEMO	ACCUM DEPREC	1,326.00	
MANUFACTURER	PHYSI PHYSIO C				
MODEL	99407-000002	RETIRE DATE			
MODEL YEAR		DISP CODE			
LICENSE #		DISP PRICE			
		SALE PRICE 0.00			
VEND # 188	PO # 2000572	DOCUMENT # IV939872	INVOICE # IV939872	INV DATE 05/23/2002	INV AMT 106,795.00

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98000	277101		100.00
5	DEPRECIATION EXPENSE	98052	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI #2020-182

DEPARTMENT: Fire Rescue

TO BE COMPLETED BY DEPARTMENT:

Property Number: 5865 Mileage / Hours if applicable: _____

Year/Description: Roll Over Safety Equipment

Serial/Vin Number: _____ Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): Equipment was attached to
to vehicle #5428 VIN# 1GNF03007R361211. Equipment was vehicle specific and out of date. Equipment has been recycled.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: Indicate how and by whom: Nassau Recycling Center

Auction: _____ Where: _____ Amount Received: _____

Other: _____ Please describe: _____

Department Head Signature: *[Signature]* Date: 9-22-20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20080038 Acquisition Cost: \$3,587.39

Acquisition Date: 04/11/2008 Book Value: -0-

Financial Services Signature: *[Signature]* Date: 9/28/20

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date: _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET # 20080038	MASTER ASSET	DESCRIPTION	ROLL OVER SAFETY EQUIPMENT	
	ADD'L DESC	EQUIPMENT FOR IMPROVEMENT TO 2007 CHEVY TAHOE VIN 1GNFK03007R361211 ASSET 20070092 TAG 5428 LIBERTY LIGHT BAR, BLINK POWER SUPPLY, FOG LAMP, HAVIS SHIELD 24", DOMINATOR, RADIO MOUNT, TILT & SWIVEL MOUNT, CUP HOLDER, BASE FOR COMPUTER		
CLASS	40 MACHINERY & EQU	FUND SOURCE	01	
SUBCL	967 ROLL OVER SAFET	ACQUIS METH	A1 PURCHASE	MAINT CONT Y INSURED N
COMMODITY				VENDOR DESC Vendor Name Mi CARRIER
DEPT	0223 FIRE DEPT	ACQUIS DATE	04/11/2008	TYPE G INSURED VAL 0.00
LOC CODE	539 FIRE/RESCUE	ACQUIS COST	3,587.39	EXPIRE DATE EXPIRE DATE
LOC MEMO	FIRE/RESCUE	ACRES	0.000	ANNUAL COST 0.00 POLICY CST 0.00
ROOM		QTY	1	MEMO MEMO
STORAGE LOC		UNIT PRICE	0.00	
		PURCH MEMO	01261526-564000	
STATUS	A ACTIVE			
CONDITION	E EXCELLENT	SOY BOOK	0.00	DEPRECIATE Y
CUSTODIAN	DEPT HEAD	CURRENT BOOK	0.00	DEPREC PRIN 3,587.39
TITLEHOLDER		EST SALVAGE	0.00	FIRST YR/PR 2008/07 LAST YR/PR 2013/06
		REPL COST	3,587.39	EST LIFE 5
TAG # 05865		LAST INVENT	07/13/2009	PERIODS TAKEN 60
SERIAL #	ATTACHED VIN 1GNFK03007R361211IMPROVE MEMO			ACCUM DEPREC 3,587.39
MANUFACTURER				
MODEL		RETIRE DATE		
MODEL YEAR		DISP CODE		
LICENSE #		DISP PRICE	0.00	
		SALE PRICE	0.00	

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98000	277101		100.00
5	DEPRECIATION EXPENSE	98052	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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DELETION FROM INVENTORY FORM

DI #2020-183

DEPARTMENT: Fire Rescue

TO BE COMPLETED BY DEPARTMENT:

Property Number: 9909 Mileage / Hours if applicable:

Year/Description: 2019 Genesis E-Force C-195 Cutter

Serial/Vin Number: 1904ES196 Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): This tool is to be traded in for a Genesis E-Force C-236 Cutter. Upgrading Cutter will standardized all Fire Rescue Extrication Equipment. Trade in value is for full price at date of purchase.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: X (Please include trade-in documents)

Destroy: Indicate how and by whom:

Auction: Where: Amount Received:

Other: Please describe:

Department Head Signature: [Signature] Date: 9-9-20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20190213 Acquisition Cost: \$9,535.80

Acquisition Date: 07/02/2019 Book Value: \$7,469.71

Financial Services Signature: [Signature] Date: 9/28/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

ASSET # 20190213		MASTER ASSET			DESCRIPTION	EXTRICATION TOOL-C195 NXTGEN EFORCE				
CLASS	40	MACHINERY & EQU	FUND SOURCE	01						
SUBCL	804	RESCUE TOOL	ACQUIS METH	A1	PURCHASE	MAINT CONT	Y	INSURED	N	
COMMODITY						VENDOR DESC	Vendor Name Mi	CARRIER		
DEPT	0223	FIRE DEPT	ACQUIS DATE		07/02/2019	TYPE	G	INSURED VAL	0.00	
LOC CODE	567	ENGINE 71	ACQUIS COST		9,535.80	EXPIRE DATE		EXPIRE DATE		
LOC MEMO			ACRES		0.000	ANNUAL COST		0.00	POLICY CST	0.00
ROOM			QTY	1		MEMO			MEMO	
STORAGE LOC			UNIT PRICE		0.00					
			PURCH MEMO		04223522-564002	RESCUE				
STATUS	A	ACTIVE								
CONDITION	E	EXCELLENT	SOY BOOK		9,059.01	DEPRECIATE	Y			
CUSTODIAN	DEPT HEAD		CURRENT BOOK		7,469.71	DEPREC PRIN		9,535.80		
TITLEHOLDER			EST SALVAGE		0.00	FIRST YR/PR	2019/10	LAST YR/PR	2020/10	
			REPL COST		9,535.80	EST LIFE	5			
TAG #	09909		LAST INVENT			PERIODS TAKEN	13			
SERIAL #	1904EZ196		IMPROVE MEMO			ACCUM DEPREC	2,066.09			
MANUFACTURER	GENES GENESIS RESCUE									
MODEL	ART.108.234.3		RETIRE DATE							
MODEL YEAR			DISP CODE							
LICENSE #			DISP PRICE		0.00					
			SALE PRICE		0.00					

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98052	564000		100.00
5	DEPRECIATION EXPENSE	98052	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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ES-077



Quote

Date	Quote #
9/2/20	20-384.

Name / Address
NASSAU COUNTY FIRE 96160 NASSAU PLACE YULEE, FL 32097

Rescue Systems Unlimited
2924 Crescent Dr. Unit A
Tallahassee, Fl. 32301

Hal Eastman
Hal.eastman@genesisrescue.com

Terms
Net 30

Item	Description	Qty	Cost	Total
EFC236.ART.109.351.4S	C236-SL3 EFORCE 3.0 STANDARD BLADES W/2 Batteries	1	12,345.00	12,345.00
EFC195.ART.108.234.3	C195 NXTGEN CUTTER EFORCE (return credit)	1	-9,080.00	-9,080.00
Freight (FOB)	FREIGHT ON BOARD		75.00	75.00

	Total	\$3,340.00
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Genesis Rescue Systems
2780 Culver Ave.
Kettering, Ohio 45429
Phone: 937.293.6240
Fax: 937.293.7049

January 29, 2020

Gentlemen,

Rescue Systems Unlimited LLC is the sole supplier/distributor, for products manufactured by Genesis Rescue Systems, Genesis Air Lifting Bags, Kodiak struts and Quik-Kut Air Hammers in Florida and Georgia. They are solely responsible for all sales, service and training in Florida, South Alabama, Mississippi and Georgia. If you have any questions, or if I can be of any further assistance, please feel free to contact me.

Sincerely,

A handwritten signature in cursive script that reads "Richard S. Michalo".

Richard S. Michalo
President
Genesis Rescue Systems

DELETION FROM INVENTORY FORM

DI # 2020-184

DEPARTMENT: Road & Bridge

TO BE COMPLETED BY DEPARTMENT:

Property Number: 1480 Mileage / Hours if applicable:

Year/Description: Modular Furniture

Serial/Vin Number: N/A Indicate if a photo is included

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program):

Desk from 2001 is broken and being replaced

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies:

Indicate how the property will be disposed of:

Trade-In: (Please include trade-in documents)

Destroy: Indicate how and by whom:

Auction: Where: Amount Received:

Other: X Please describe: Take to Nassau County Recycle Center Dumpsters

Department Head Signature: [Signature] Date: 9-18-20

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20011406 Acquisition Cost: \$2,401.64

Acquisition Date: 11/30/1999 Book Value: -0-

Financial Services Signature: [Signature] Date: 9/28/20

BOARD APPROVAL:

Board of County Commissioners Chair:

Ex-Officio Clerk to the Board of County Commissioners:

Date

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: Date:

ASSET # 20011406	MASTER ASSET	RD 885	DESCRIPTION	OFFICE FURNITURE (R&B SUPERVISOR'S)		
	ADD'L DESC	WILKERSON AND COMPANY				
		03404541-564000				
		DRAWER, TRAY, CREDENZA,	CORNER WEDGE, ETC			
CLASS	40 MACHINERY & EQU	FUND SOURCE	01			
SUBCL	200 OFFICE FURNITUR	ACQUIS METH	A1 PURCHASE	MAINT CONT	N	INSURED N
COMMODITY				VENDOR DESC	Vendor Name Mi	CARRIER
DEPT	0410 ROAD & BRIDGE	ACQUIS DATE	11/30/1999	TYPE	G	INSURED VAL 0.00
LOC CODE	270 ROAD & BRIDGE	ACQUIS COST	2,401.64	EXPIRE DATE		EXPIRE DATE
LOC MEMO	ROAD SUPER OFFICE	ACRES	0.000	ANNUAL COST	0.00	POLICY CST 0.00
ROOM		QTY	7	MEMO		MEMO
STORAGE LOC		UNIT PRICE	0.00			
		PURCH MEMO	WILKERSON & COMPANY 03			
STATUS	A ACTIVE					
CONDITION	E EXCELLENT	SOY BOOK	0.00	DEPRECIATE	Y	
CUSTODIAN	TRANSPORTATION	CURRENT BOOK	0.00	DEPREC PRIN	2,401.64	
TITLEHOLDER		EST SALVAGE	0.00	FIRST YR/PR	2000/02	LAST YR/PR 2005/01
		REPL COST	2,401.64	EST LIFE	5	
TAG # 1480		LAST INVENT	06/24/2009	PERIODS TAKEN	60	
SERIAL #		IMPROVE MEMO		ACCUM DEPREC	2,401.64	
MANUFACTURER						
MODEL		RETIRE DATE				
MODEL YEAR		DISP CODE				
LICENSE #		DISP PRICE				
		SALE PRICE	0.00			
VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT	
4698	1240	2051			2,401.64	

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98000	277110		100.00
5	DEPRECIATION EXPENSE	98054	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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