FINANCE PA	CKAGE 20	019-03				12/10/2018
OTHER ITEMS	FOR CONSIDER	ATION:				
1.)	Аррі	rove attached	Deletion from In	ventory Forms.		 - 2
	Support:	Tab	1	Page	Α	

Tab 1
Page A



John A. Crawford Clerk of the Circuit Court Nassau County



MEMORANDUM

To: Cindy Wood, OMB

From: Kari Ulmer, Clerk Financial Services

Date: 11/14/18

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
19.001	20101218	6569	Health Dept
19.002	20130327	7394	Health Dept
19.003	20140084	7624	Health Dept
19.004	20140089	7629	Health Dept
19.005	20140091	7631	Health Dept
19.006	20140095	7635	Health Dept
19.007	20140097	7637	Health Dept
19.008	20140098	7638	Health Dept
19.009	20140100	7640	Health Dept
19.010	20140099	7639	Health Dept
19.011	20140101	7641	Health Dept
19.012	20140119	7659	Health Dept
19.013	20140109	7649	Health Dept
19.014	20160042	8713	Health Dept

Thanks

DELETION FROM INVENTORY FORM DI #2019-001

DEPARTMENT:	Health Department	- 2010 A.	DI# 2017 001
TO BE COMPLETE	D BY DEPARTMENT:	= 2919 OCT 17	PH 4: 50
Property Number:	6569 Mileage / H		
Year/Description:	Latitude E6500		V 107 9
Serial/Vin Number:	4LQNVL1 Indicate if		
Describe the reason for de	eletion (Include replacement criteria if part of the Fl	eet Replacement Program):	
Surplus recycle out of dat	e.		
If an election was made to	o offer the property to other governmental units or p	rivate nonprofit agencies per Florida	a 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 Signatu	ire: & Mamos	Date:	ROUB 60 9 NOV 1
TO BE COMPLETE	D BY FINANCIAL SERVICES:		C.
Asset Number:	20101218 Acquisition	n Cost: \$1,28	39.90
Acquisition Date:	09/30/2010 Book Valu	e:)-
Financial Services Signat	ture: Savi Wemen	Date: 10/04	/18
BOARD APPROVAL	<u></u>		
Board of County Commis	sioners Chair:		
Ex-Officio Clerk to the Bo	oard of County Commissioners:		
TO BE COMPLETE	D AFTER DISPOSAL:	Date	
Signature of Person Disp	osing of the Property:		Date:

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10/24/2018 09:34 | BOARD OF COMMISSIONERS 6235kulm | FIXED ASSET WORKSHEET

ASSET # 20101218	MASTER ASSET		DESCRIPTION	COMPUTER-DELL LA	ATITUDE E6500	
CLASS 40 MACHINERY & EQ	U FUND SOURCE 01					
SUBCL 116 COMPUTER	ACQUIS METH A1	PURCHASE	MAINT CONT	Y	INSURED	N
COMMODITY			VENDOR DESC	Vendor Name Mi	CARRIER	
DEPT 0624 ENVIRONMENTAL	H ACQUIS DATE	09/30/2010	TYPE	G	INSURED VAL	0.00
LOC CODE 255 ENVIRONMENTAL	H ACQUIS COST	1,289.90	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	1,289.	. 90	
TITLEHOLDER	EST SALVAGE	0.00	FIRST YR/PR	2010/12	LAST YR/PR	2013/11
	REPL COST	1,289.90	EST LIFE	3		
TAG # 06569	LAST INVENT		PERIODS TAKE	IN 36		
SERIAL # 4LQNVL1	IMPROVE	MEMO	ACCUM DE	PREC 1,289.	90	
MANUFACTURER DELL DELL						
MODEL LATITUDE E6500	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

TYF	PE 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

ORG	OBJ	PROJ	AMOUNT

DI#2019-002

DEPARTMENT:	Health Department 2819 from
TO BE COMPLETE	D BY DEPARTMENT: 2018 OCT 17 PM 4: 50
Property Number:	Mileage / Hours if applicable:
Year/Description:	LATITUDE E6530
Serial/Vin Number:	3PCTJX1 Indicate if a photo is included
Describe the reason for de	eletion (Include replacement criteria if part of the Fleet Replacement Program):
Surplus recycle out of dat	e.
If an election was made to	o 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 Signatu	re: <u>Shamas</u> Date: 10/16/18
TO BE COMPLETE	D BY FINANCIAL SERVICES:
Asset Number:	20130327 Acquisition Cost: \$1,029.10
Acquisition Date:	05/22/2013 Book Value: -0-
Financial Services Signat	ure: Karillmer W Date: 10/24/18
BOARD APPROVAL	<u></u>
Board of County Commis	sioners Chair:
Ex-Officio Clerk to the Bo	pard of County Commissioners:
TO BE COMPLETE	Date
Signature of Person Dispo	osing of the Property: Date:

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10/24/2018 09:34 | BOARD OF COMMISSIONERS FIXED ASSET WORKSHEET

ASSET # 20130327	MASTER ASSET	DESCRIPTION	LATITUDE E6530		
CLASS 40 MACHINERY & EQU	FUND SOURCE 01				
SUBCL 116 COMPUTER	ACQUIS METH A1 PURCH	HASE MAINT CONT	Y	INSURED	N
COMMODITY		VENDOR DESC	Vendor Name Mi	CARRIER	
DEPT 0625 HEALTH DEPARTM	E ACQUIS DATE 05/22	2/2013 TYPE	G	INSURED VAL	0.00
LOC CODE 254 HEALTH DEPT	ACQUIS COST 1,0	29.10 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	0.09 DEPRECIATE	Y		
CUSTODIAN DEPT HEAD	CURRENT BOOK	0.09 DEPREC PRIN	1,029.	10	
TITLEHOLDER	EST SALVAGE	0.00 FIRST YR/PR	2013/08	LAST YR/PR	2016/07
	REPL COST 1,0	29.10 EST LIFE	3		
TAG # 07394	LAST INVENT	PERIODS TAKE	EN 36		
SERIAL # 3PCTJX1	IMPROVE MEMO	ACCUM DI	EPREC 1,029.	10	
MANUFACTURER DELL DELL					
MODEL E6530	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

5555					
	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

ORG	OBJ	PROJ	AMOUNT	

DELETION FROM INVENTORY FORM DI # 2019-003

DEPARTMENT:	Health Department	20 ta -	
TO BE COMPLETE	D BY DEPARTMENT:	2018 OCT 17 PM 4: 50	
Property Number:	7624 Mileage / H	Hours if applicable:	
Year/Description:	OPTIPLEX 7010		
Serial/Vin Number:	1QG9HX1 Indicate if	a photo is included	
Describe the reason for de	eletion (Include replacement criteria if part of the Flo	eet Replacement Program):	
Surplus recycle out of dat	e.		
FA 15			
		rivate 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 Signatu	10	Date: 10/16/18	
TO BE COMPLETE	D BY FINANCIAL SERVICES:		
Asset Number:	20140084 Acquisition	n Cost: \$1,125.45	
Acquisition Date:	06/19.2013 Book Valu	e: -0-	
Financial Services Signat	ure: Kari Ulmer	Date: 10/04/18	
BOARD APPROVAL			
Board of County Commiss	sioners Chair:		
Ex-Officio Clerk to the Bo	oard of County Commissioners:		
		Date	
TO BE COMPLETED	D AFTER DISPOSAL:	 -	
Signature of Person Dispo	osing of the Property:	Date:	

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10/24/2018 09:35 | BOARD OF COMMISSIONERS 6235kulm | FIXED ASSET WORKSHEET

ASSET # 20140084	MASTER ASSET	DESCRIPTION OPTIPLEX 7010
CLASS 40 MACHINERY & E	QU FUND SOURCE 01	
SUBCL 116 COMPUTER	ACQUIS METH A1 PURCHAS	SE MAINT CONT Y INSURED N
COMMODITY		VENDOR DESC Vendor Name Mi CARRIER
DEPT 0626 HEALTH DEPT-1	FER ACQUIS DATE 06/19/2	2013 TYPE G INSURED VAL 0.00
LOC CODE 250 HEALTH DEPT F	B ACQUIS COST 1,125	5.45 EXPIRE DATE EXPIRE DATE
LOC MEMO	ACRES 0.0	000 ANNUAL COST 0.00 POLICY CST 0.00
ROOM	QTY 1	MEMO MEMO
STORAGE LOC	UNIT PRICE 0	0.00
	PURCH MEMO DELL	
STATUS A ACTIVE		
CONDITION E EXCELLENT	SOY BOOK 0	0.02 DEPRECIATE Y
CUSTODIAN DEPT HEAD	CURRENT BOOK 0	0.02 DEPREC PRIN 1,125.45
TITLEHOLDER	EST SALVAGE 0	0.00 FIRST YR/PR 2013/09 LAST YR/PR 2016/08
	REPL COST 1,125	5.45 EST LIFE 3
TAG # 07624	LAST INVENT	PERIODS TAKEN 36
SERIAL # 1QG9HX1	IMPROVE MEMO	ACCUM DEPREC 1,125.45
MANUFACTURER DELL DELL		
MODEL OPTIPLEX 7010	RETIRE DATE	
MODEL YEAR	DISP CODE	
LICENSE #	DISP PRICE 0	0.00
	SALE PRICE 0	0.00
VEND # PO # DOCUMENT #	INVOICE # INV E	DATE INV AMT

G/L Accounts

	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

ORG	OBJ	PROJ	AMOUNT

DI# 2019-004

DEPARTMENT:	Health Department	
TO BE COMPLETE	ED BY DEPARTMENT:	2010 OCT 17 PM 4: 50
Property Number:		
Year/Description:	OPTIPLEX 7010	1.5. 4. 1777-6
Serial/Vin Number:	1R17HX1 Indicate if	a photo is included
Describe the reason for de	eletion (Include replacement criteria if part of the Fl	eet Replacement Program):
Surplus recycle out of dat	te.	
	o offer the property to other governmental units or p	rivate nonprofit agencies per Florida Statute 274.05, please
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 Signatu	ire: 2 Man os	Date: 10/16/18
TO BE COMPLETE	D BY FINANCIAL SERVICES:	
Asset Number:		n Cost: \$1,125.45
Acquisition Date:	06/19/2013 Book Valu	-0-
Financial Services Signa	ture: Kari Wemer	Date: 10/4/18
BOARD APPROVAL	<u>L:</u>	
Board of County Commis	ssioners Chair:	
Ex-Officio Clerk to the B	oard of County Commissioners:	
TO BE COMPLETE	D AFTER DISPOSAL:	Date

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VEND #

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10/24/2018 09:36 | BOARD OF COMMISSIONERS FIXED ASSET WORKSHEET

ASSET # 20140	0089	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	0627 HEALTH DEPT-YUI	ACQUIS DATE	06/19/2013	TYPE	G	INSURED VAL		0.00
LOC CODE	251 HEALTH DEPT - Y	ACQUIS COST	1,125.45	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	0.02	DEPRECIATE	Y			
CUSTODIAN	DEPT HEAD	CURRENT BOOK	0.02	DEPREC PRIN	1,125.	45		
TITLEHOLDER		EST SALVAGE	0.00	FIRST YR/PR	2013/09	LAST YR/PR	2016/08	
		REPL COST	1,125.45	EST LIFE	3			
TAG # 07629)	LAST INVENT		PERIODS TAKEN	36			
SERIAL #	1R17HX1	IMPROV	/E MEMO	ACCUM DEPI	REC 1,125.	45		
MANUFACTURER	DELL DELL							
MODEL	OPTIPLEX 7010	RETIRE DATE						
MODEL YEAR		DISP CODE						
LICENSE #		DISP PRICE	0.00					
	8	SALE PRICE	0.00					

INV AMT

G/L Accounts

DOCUMENT # INVOICE #

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

INV DATE

10,000,000			
ORG	OBJ	PROJ	AMOUNT

DI #2019-005

DEPARTMENT:	Health Department
TO BE COMPLETE	2018 OCT 17 PM 4: 50
Property Number:	Mileage / Hours if applicable:
Year/Description:	ODWING TO 1 TO 1 O
Serial/Vin Number:	1R98HX1 Indicate if a photo is included
	indicate if a prioto is included
Describe the reason for de	eletion (Include replacement criteria if part of the Fleet Replacement Program):
Surplus recycle out of dat	te.
·	
If an election was made to	o 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 Signatu	are: 24homas Date: 6/16/18
TO BE COMPLETE	D BY FINANCIAL SERVICES:
Asset Number:	20140091 Acquisition Cost: \$1,125.45
Acquisition Date:	06/19/2013 Book Value: -0-
Financial Services Signat	ture: Yar Welmer Wate: 10/04/18
BOARD APPROVAL	<u>L:</u>
Board of County Commis	ssioners Chair:
Ex-Officio Clerk to the Bo	oard of County Commissioners:
TO BE COMPLETE	Date
	osing of the Property:

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10/24/2018 09:38 | BOARD OF COMMISSIONERS 6235kulm | FIXED ASSET WORKSHEET

ASSET # 20140	091	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	0627 HEALTH DEPT-YUL	ACQUIS DATE	06/19/2013	TYPE	G	INSURED VAL	0.	00
LOC CODE	251 HEALTH DEPT - Y		1,125.45	EXPIRE DATE		EXPIRE DATE		
LOC MEMO		ACRES	0.000	ANNUAL COST	0.00	POLICY CST	0.	0.0
ROOM		QTY	1	MEMO		MEMO		
STORAGE LOC		UNIT PRICE	0.00					
51014102 200		PURCH MEMO	DELL					
STATUS	A ACTIVE							
CONDITION	E EXCELLENT	SOY BOOK	0.02	DEPRECIATE	Y			
CUSTODIAN	DEPT HEAD	CURRENT BOOK	0.02	DEPREC PRIN	1,125.	.45		
TITLEHOLDER		EST SALVAGE	0.00	FIRST YR/PR	2013/09	LAST YR/PR	2016/08	
		REPL COST	1,125.45	EST LIFE	3			
TAG # 07631	L	LAST INVENT		PERIODS TAKE	EN 36			
SERIAL #	1R98HX1	IMPROV	E MEMO	ACCUM DI	EPREC 1,125	. 45		
MANUFACTURER	DELL DELL							
MODEL	OPTIPLEX 7010	RETIRE DATE						
MODEL YEAR		DISP CODE						
LICENSE #		DISP PRICE	0.00					
		SALE PRICE	0.00					
VEND # PO	D # 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		
5	DEPRECIATION EXPENSE	98056	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

______ ORG OBJ PROJ AMOUNT

DI#<u>2019-006</u>

DEPARTMENT:	Health Department	_								
TO BE COMPLETE	ED BY DEPARTMENT:	2018 007 17 PM 4: 49								
Property Number:	7635 Mileage / H	Hours if applicable:								
Year/Description:	OPTIPLEX 7010									
Serial/Vin Number:	1RF8HX1 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 da										
If an election was made to	o offer the property to other governmental units or p	rivate nonprofit agencies per Florida Statute 2	74.05, please							
*	y		=							
·										
Indicate how the property	will be disposed of:									
Trade-In: (Please include trade-in documents)										
Destroy:	Indicate how and by whom:									
Auction:		Amount Received:								
Other: X	Please describe: Recycling E-Scrap									
Department Head Signatu	ure: Jahamas	Date: 6/6/17								
TO BE COMPLETE	D BY FINANCIAL SERVICES:	/ *								
Asset Number:	20140095 Acquisition	n Cost: \$1,125.45								
Acquisition Date:	06/19/2013 Book Valu	-0-								
Financial Services Signat	ture: Kan Ulmer	Date: 10/44/18								
BOARD APPROVAL	<u></u>	*								
Board of County Commis	sioners Chair:									
Ex-Officio Clerk to the Be	oard of County Commissioners:		2							
TO BE COMPLETE	D AFTER DISPOSAL:	Date								
Signature of Person Disp	osing of the Property:	Da	te:							

10/24/2018 09:39 | BOARD OF COMMISSIONERS 6235kulm | FIXED ASSET WORKSHEET

ASSET # 20140	0095	MASTER ASSET		DESCRIPTION	OPTIPLEX 7010			
CLASS	40 MACHINERY & EQU	FUND SOURCE 01						
SUBCL	116 COMPUTER	ACQUIS METH A1	PURCHASE	MAINT CONT	Υ	INSURED	N	
COMMODITY				VENDOR DESC	Vendor Name Mi	CARRIER		
DEPT	0626 HEALTH DEPT-FE	R ACQUIS DATE	06/19/2013	TYPE	G	INSURED VAL		0.00
LOC CODE	250 HEALTH DEPT F.B	ACQUIS COST	1,125.45	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 DE	LL					
STATUS	A ACTIVE							
CONDITION	E EXCELLENT	SOY BOOK	0.02	DEPRECIATE	Y			
CUSTODIAN	DEPT HEAD	CURRENT BOOK	0.02	DEPREC PRIN	1,125.	. 45		
TITLEHOLDER		EST SALVAGE	0.00	FIRST YR/PR	2013/09	LAST YR/PR	2016/08	8
		REPL COST	1,125.45	EST LIFE	3			
TAG # 07635	5	LAST INVENT		PERIODS TAKE	EN 36			
SERIAL #	1RF8HX1	IMPROVE	MEMO	ACCUM DE	PREC 1,125.	. 45		
MANUFACTURER	DELL DELL							
MODEL	OPTIPLEX 7010	RETIRE DATE						
MODEL YEAR		DISP CODE						
LICENSE #		DISP PRICE	0.00					
		SALE PRICE	0.00					
VEND # PC	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

DI # 2019-007

DEPARTMENT:	Health Department		DI# <u>2019</u> -007
TO BE COMPLETE	D BY DEPARTMENT:	2013 no	T17 PM 4:49
Durant N. 1	7/27		
Property Number:			10
Year/Description:	OPTIPLEX 7010		10 10 10 10 10 10 10 10 10 10 10 10 10 1
Serial/Vin Number:	1RJ7HX1	Indicate if a photo is included	.
Describe the reason for de	eletion (Include replacement criteria if p	art of the Fleet Replacement Progra	m):
Surplus recycle out of dat	te.		
If an election was made to	o offer the property to other government	al units or private nonprofit agencie	s ner Florida Statute 274.05, please
indicate which agencies.	-		
Indicate how the name			
Indicate how the property			
Trade-In:	(Please include trade-in documents)		
Destroy:	Indicate how and by whom:		
Auction:	Where:	Amount R	eceived:
Other: X	Please describe: Recycling F	-Scrap	
Department Head Signatu	ire:	Date:	10/16/18
TO BE COMPLETE	D BY FINANCIAL SERVICES:		
Asset Number:	20140097	Acquisition Cost:	\$1,125.45
Acquisition Date:	06/19/2013	Book Value:	-0-
Financial Services Signat	ture: Kari U	Omer Wate:	10/24/18
BOARD APPROVAL	<u></u>		. <u>#</u> f
Board of County Commis	sioners Chair:		
Ex-Officio Clerk to the Bo	oard of County Commissioners:		
TO BE COMPLETE	D AFTER DISPOSAL:	Date	
Signature of Person Disp	osing of the Property:		Date:

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10/24/2018 09:39 | BOARD OF COMMISSIONERS 6235kulm FIXED ASSET WORKSHEET

ASSET # 20140	097		MASTER ASSET			DESCRIPTION	OPTIP	LEX 7010					
CLASS	40	MACHINERY & EQU	FUND SOURCE	01									
SUBCL	116	COMPUTER	ACQUIS METH	A1	PURCHASE	MAINT CONT	Y			INSURED	N		
COMMODITY						VENDOR DESC	Vendo	r Name Mi	-	CARRIER			
DEPT	0627	HEALTH DEPT-YUL	ACQUIS DATE		06/19/2013	TYPE	G			INSURED VAL			0.00
LOC CODE	251	HEALTH DEPT - Y	ACQUIS COST		1,125.45	EXPIRE DATE				EXPIRE DATE			
LOC MEMO			ACRES		0.000	ANNUAL COST		0.0	0	POLICY CST			0.00
ROOM			QTY	1		MEMO				MEMO			
STORAGE LOC			UNIT PRICE		0.00								
			PURCH MEMO	DEL	L								
STATUS	A A	CTIVE											
CONDITION	E E	XCELLENT	SOY BOOK		0,02	DEPRECIATE	Y						
CUSTODIAN	DEPT	' HEAD	CURRENT BOOK		0.02	DEPREC PRIN		1,12	25.4	5			
TITLEHOLDER			EST SALVAGE		0.00	FIRST YR/PR	2	013/09		LAST YR/PR	2	016/08	
			REPL COST		1,125.45	EST LIFE		3					
TAG # 07637			LAST INVENT			PERIODS TAKE	EN	36					
SERIAL #	1RJ7	HX1	IMPRO	VE M	EMO	ACCUM DE	EPREC	1,12	25.4	5			
MANUFACTURER	DELL	DELL											
MODEL	OPTI	PLEX 7010	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

	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

DI#2019-008

DED A DOMESTIC			- Lagran	JI# <u>2019</u> _000
DEPARTMENT:	Health Department			
TO BE COMPLETE	D BY DEPARTMENT:	1944 or	717 PM 4:49	
Property Number:	7638 Milea	ge / Hours if applicable:	111 01 49	
Year/Description:	OPTIPLEX 7010		- A	
Serial/Vin Number:	1RJ8HX1 India			
	eletion (Include replacement criteria if part of	he Fleet Replacement Program	m):	
Surplus recycle out of da	te.			- 10
If an election was made to	o offer the property to other governmental unit	s or private nonprofit agencies	s per Florida Statute 274.0	5, 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 Re	eceived:	
Other: X	Please describe: Recycling E-Scra)		
Department Head Signatu	ure: 2 than	Date:	0/16/18	_
TO BE COMPLETE	D BY FINANCIAL SERVICES:		1	
Asset Number:	20140098 Acqu	isition Cost:	\$1,125.45	
Acquisition Date:	06/19/2013Book	Value:	-0-	
Financial Services Signa	ture: Kasi Ulu	nes Wate:	10/24/18	
BOARD APPROVAL				
Board of County Commis	sioners Chair:			
Ex-Officio Clerk to the B	oard of County Commissioners:			
TO BE COMPLETE	D AFTER DISPOSAL:	Date		_
Signature of Person Disp	osing of the Property:		Date:	

6235kulm

10/24/2018 09:39 | BOARD OF COMMISSIONERS FIXED ASSET WORKSHEET

ASSET # 20140	098		MASTER ASSET			DESCRIPTION	OPTI	PLEX 7010				
CLASS	40	MACHINERY & EQU	FUND SOURCE	01								
SUBCL	116	COMPUTER	ACQUIS METH	Al	PURCHASE	MAINT CONT	Y		INSURED	N		
COMMODITY						VENDOR DESC	Vendo	or Name Mi	CARRIER			
DEPT	0627	HEALTH DEPT-YUL	ACQUIS DATE		06/19/2013	TYPE	G		INSURED VAL		0.0	0
LOC CODE	251	HEALTH DEPT - Y	ACQUIS COST		1,125.45	EXPIRE DATE			EXPIRE DATE			
LOC MEMO			ACRES		0.000	ANNUAL COST		0.00	POLICY CST		0.0	0
ROOM			QTY	1		MEMO			MEMO			
STORAGE LOC			UNIT PRICE		0.00							
			PURCH MEMO	DELI	L							
STATUS	A A	CTIVE										
CONDITION	E EX	KCELLENT	SOY BOOK		0.02	DEPRECIATE	7	Y				
CUSTODIAN	DEPT	HEAD	CURRENT BOOK		0.02	DEPREC PRIN		1,125.	45			
TITLEHOLDER			EST SALVAGE		0.00	FIRST YR/PR		2013/09	LAST YR/PR	2016/	08	
			REPL COST		1,125.45	EST LIFE		3				
TAG # 07638			LAST INVENT			PERIODS TAKE	N	36				
SERIAL #	1RJ8F	HX1	IMPRO\	JE MI	EMO	ACCUM DE	PREC	1,125.	45			
MANUFACTURER	DELL	DELL										
MODEL	OPTIE	PLEX 7010	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 EX	PENSE	98056	559000		100.00
6	ACCUMULATED DEP	RECIATION	98000	167900		100.00

557755				
ORG	OBJ	PROJ	AMOUNT	

	DELETION	FROM INVENTORY I	FORM DI# 201
DEPARTMENT:	Health Department		
TO BE COMPLET	ED BY DEPARTMENT:		2018 BCT 17 PH 4: 49
Property Number:	7640	Mileage / Hours if applicable	:
Year/Description:	OPTIPLEX 7010		, : 100 mb
Serial/Vin Number:	1RR9HX1	Indicate if a photo is include	d
Describe the reason for o	deletion (Include replacement criteria	a if part of the Fleet Replacement F	rogram):
Surplus recycle out of da			<u> </u>
If an election was made	to offer the property to other governr	mental units or private nonprofit ag	encies per Florida Statute 274.05, please
indicate which agencies:			
	-		
Indicate how the propert	y will be disposed of:		
Trade-In:	(Please include trade-in document	ts)	
Destroy:	Indicate how and by whom:		
		,	
Auction:		-	unt Received:
Other: X	Please describe: Recycli	ing E-Scrap	
Department Head Signat	ture:	maDate	6/16/18
TO BE COMPLETI	ED BY FINANCIAL SERVICE	ES:	1. 10
Asset Number:	20140100	Acquisition Cost:	\$1,125.45
Acquisition Date:	06/19/2013	Book Value:	-0-
*	V .	-	
Financial Services Signa	/	Wenner (Date	10/24/18
BOARD APPROVA			
Board of County Commi	issioners Chair:		
Ex-Officio Clerk to the I	Board of County Commissioners:	*1	
		Date	
TO BE COMPLETI	ED AFTER DISPOSAL:	-	
Signature of Person Dis	posing of the Property:	¥	Date:

10/24/2018 09:40 | BOARD OF COMMISSIONERS 6235kulm FIXED ASSET WORKSHEET

ASSET # 20140	100		MASTER ASSET			DESCRIPTION	OPTIPLEX 7010			
CLASS	40	MACHINERY & EQU	FUND SOURCE	01						
SUBCL	116	COMPUTER	ACQUIS METH	Al	PURCHASE	MAINT CONT	Y	INSURED	N	
COMMODITY						VENDOR DESC	Vendor Name Mi	CARRIER		
DEPT	0626	HEALTH DEPT-FER	ACQUIS DATE		06/19/2013	TYPE	G	INSURED VAL		0.00
LOC CODE	250	HEALTH DEPT F.B	ACQUIS COST		1,125.45	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	DEL	<u> </u>					
STATUS	A A	CTIVE								
CONDITION	E E	XCELLENT	SOY BOOK		0.02	DEPRECIATE	Y			
CUSTODIAN	DEPT	' HEAD	CURRENT BOOK		0.02	DEPREC PRIN	1,125.	45		
TITLEHOLDER			EST SALVAGE		0.00	FIRST YR/PR	2013/09	LAST YR/PR	2016/	08
		-	REPL COST		1,125.45	EST LIFE	3	•		
TAG # 07640)		LAST INVENT			PERIODS TAKE	EN 36			
SERIAL #	1RR9	HX1	IMPRO	VE M	EMO	ACCUM DE	PREC 1,125.	45		
MANUFACTURER	DELL	DELL								
MODEL	OPTI	PLEX 7010	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

	E DESC	ORG	OBJ	PROJ	PERCENT	4
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	

ORG	OBJ	PRO _t T	AMOUNT	

	DELETION 1	FROM INVENTORY FORM
DEPARTMENT:	Health Department	DI# 2019
TO BE COMPLET	ED BY DEPARTMENT:	2018 OCT 17 PM 4: 49
Property Number:	7639	Mileage / Hours if applicable:
Year/Description:	OPTIPLEX 7010	
Serial/Vin Number:	1RN7HX1	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 d		
If an election was made	to offer the property to other governm	nental units or private nonprofit agencies per Florida Statute 274.05, please
indicate which agencies		
Indicate how the propert	y will be disposed of:	
Trade-In:	(Please include trade-in documents	;)
Destroy:	Indicate how and by whom:	
Auction:	Where:	Amount Received:
Other: X		ng E-Scrap
	101	
Department Head Signat	ture:	Date: 0/6/8
TO BE COMPLETI	ED BY FINANCIAL SERVICE	
Asset Number:	20140099	Acquisition Cost: \$1,125.45
Acquisition Date:	06/19/2013	Book Value: -0-
Financial Services Signa	ature:	Memer Date: 10/54/18
BOARD APPROVA	')	Date.
Board of County Commi		
Ev Officia Claule to the I	Poord of County Commissioners	
Ex-Officio Clerk to the I	Board of County Commissioners:	
TO BE COMPLETI	ED AFTER DISPOSAL:	Date
Signature of Person Dis	posing of the Property:	Date:

-	P	1
	famstm	ıt

10/24/2018 09:40 | BOARD OF COMMISSIONERS 6235kulm | FIXED ASSET WORKSHEET

ASSET # 20140	099		MASTER ASSET			DESCRIPTION	OPTIPLEX 7	010			
CLASS	40	MACHINERY & EQU	FUND SOURCE	01							
SUBCL	116	COMPUTER	ACQUIS METH	A1	PURCHASE	MAINT CONT	Y		INSURED	N	
COMMODITY						VENDOR DESC	Vendor Nam	e Mi	CARRIER		
DEPT	0627	HEALTH DEPT-YUL	ACQUIS DATE		06/19/2013	TYPE	G		INSURED VAL		0.00
LOC CODE	251	HEALTH DEPT - Y	ACQUIS COST		1,125.45	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	DEL	С						
STATUS	A A	CTIVE									
CONDITION	E E	XCELLENT	SOY BOOK		0.02	DEPRECIATE	Y				
CUSTODIAN	DEPI	HEAD	CURRENT BOOK		0.02	DEPREC PRIN		1,125.	45		
TITLEHOLDER			EST SALVAGE		0.00	FIRST YR/PR	2013/0	9	LAST YR/PR	2016/0	8
			REPL COST		1,125.45	EST LIFE	3				
TAG # 07639)		LAST INVENT			PERIODS TAKE	N 3	6			
SERIAL #	1RN7	'HX1	IMPRO'	VE MI	EMO	ACCUM DE	PREC	1,125.	45		
MANUFACTURER	DELI	DELL									
MODEL	OPTI	PLEX 7010	RETIRE DATE								
MODEL YEAR			DISP CODE								
LICENSE #			DISP PRICE		0.00						
			SALE PRICE		0.00						
VEND # PC	#	DOCUMENT #	INVOICE #		INV DATE	INV AMT					

G/L Accounts

TYPI	E 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

DI#2019-011

			#2017 011
DEPARTMENT:	Health Department		
TO BE COMPLETE	D BY DEPARTMENT:	2918 OCT 17 PM 4: 49	
Property Number:	7641 Mileage / I	Hours if applicable:	
Year/Description:	OPTIPLEX 7010		
Serial/Vin Number:	1RT6HX1 Indicate if	a photo is included	
Describe the reason for do	eletion (Include replacement criteria if part of the F	leet Replacement Program):	
Surplus recycle out of dat	te.		
	o offer the property to other governmental units or p	vrivate nonprofit agencies per Florida Statute 274.05,	please
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 Signatu	re: Mana	Date: 1016118	-
TO BE COMPLETE	D BY FINANCIAL SERVICES:		
Asset Number:	20140101 Acquisitio	n Cost: \$1,125,45	-
Acquisition Date:	06/19/2013 Book Valu	-0-	
Financial Services Signat	ure: Kari Ulme	r (Voate: 10/24/18	<u>-</u>
BOARD APPROVAL	<u>ı:</u>		
Board of County Commis	sioners Chair:		
Ex-Officio Clerk to the Bo	pard of County Commissioners:		
TO BE COMPLETE	D AFTER DISPOSAL:	Date	=1
Signature of Person Dispo	osing of the Property:	Date:	

6235kulm

10/24/2018 09:40 | BOARD OF COMMISSIONERS FIXED ASSET WORKSHEET

ASSET # 2014(0101	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	0626 HEALTH DEPT-FER	ACQUIS DATE	06/19/2013	TYPE	G	INSURED VAL		0.00
LOC CODE	250 HEALTH DEPT F.B	ACQUIS COST	1,125.45	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	0.02	DEPRECIATE	Y			
CUSTODIAN	DEPT HEAD	CURRENT BOOK	0.02	DEPREC PRIN	1,125.	.45		
TITLEHOLDER		EST SALVAGE	0.00	FIRST YR/PR	2013/09	LAST YR/PR	2016/0	8
		REPL COST	1,125.45	EST LIFE	3			
TAG # 07641	L	LAST INVENT		PERIODS TAKE	IN 36			
SERIAL #	1RT6HX1	IMPROV	/E MEMO	ACCUM DE	PREC 1,125.	45		
MANUFACTURER	DELL DELL							
MODEL	OPTIPLEX 7010	RETIRE DATE						
MODEL YEAR		DISP CODE						
LICENSE #		DISP PRICE	0.00					
		SALE PRICE	0.00					
VEND # PC	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

ORG	OBJ	PROJ	AMOUNT

DI#2019-012

DED A DENGENCE.	TY Id D		DI#2019-012
DEPARTMENT:	Health Department	2019 mar 17 pu	
TO BE COMPLETE	D BY DEPARTMENT:	2018 OCT 17 PM 4: 49	
Property Number:	7659 Mileag	e / Hours if applicable:	
Year/Description:	OPTIPLEX 7010		l.
Serial/Vin Number:	H724CY1 Indica	te if a photo is included	
Describe the reason for de	eletion (Include replacement criteria if part of the	e Fleet Replacement Program):	
Surplus recycle out of dat	e		
		or private nonprofit agencies per Florida Statute 2	274.05, please
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 Signatu	re: Whana	Date:	
TO BE COMPLETE	D BY FINANCIAL SERVICES:		
Asset Number:	20140119 Acquir	sition Cost: \$767.50	
Acquisition Date:	10/08/2013Book	Value: -0-	
Financial Services Signat	ure: Kan Welne	Date: 10/24/18	-
BOARD APPROVAL	<u>4:</u>	,	
Board of County Commiss	sioners Chair:	:	
Ex-Officio Clerk to the Bo	oard of County Commissioners:		
TO BE COMPLETE	D AFTER DISPOSAL:	Date	
Signature of Person Dispo	osing of the Property:	D ₁	ate:

6235kulm

10/24/2018 09:41 | BOARD OF COMMISSIONERS FIXED ASSET WORKSHEET

ASSET # 20140	119		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 Na	ame Mi	CARRIER		
DEPT	0629	HEALTH DEPT-HIL	ACQUIS DATE		10/08/2013	TYPE	G		INSURED VAL		0.00
LOC CODE	253	HEALTH DEPT-HIL	ACQUIS COST		767.50	EXPIRE DATE			EXPIRE DATE		
LOC MEMO			ACRES		0.000	ANNUAL COST		0.00	POLICY CST		0.00
ROOM			YTQ	1		MEMO			MEMO		
STORAGE LOC			UNIT PRICE		0.00						
			PURCH MEMO	DEL	L						
STATUS	A A	CTIVE									
CONDITION	E E	EXCELLENT	SOY BOOK		0.00	DEPRECIATE	Y				
CUSTODIAN	DEPI	HEAD	CURRENT BOOK		0.00	DEPREC PRIN		767.	50		
TITLEHOLDER			EST SALVAGE		0.00	FIRST YR/PR	2014	/01	LAST YR/PR	2016/1	2
			REPL COST		767.50	EST LIFE	3				
TAG # 07659			LAST INVENT			PERIODS TAKE	IN	36			
SERIAL #	H724	CY1	IMPRO	VE M	EMO	ACCUM DE	PREC	767.	50		
MANUFACTURER	DELI	DELL									
MODEL	OPTI	PLEX 7010	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

ORG	OBJ	PROJ	AMOUNT

	DELETION F	ROM INVENTORY F	ORM	Dr.# 2010_013
DEPARTMENT:	Health Department			DI#_2019-013
TO BE COMPLET	ED BY DEPARTMENT:	2818 007	17 PM 4:49	
Property Number:	7649	Mileage / Hours if applicable:		
Year/Description:	OPTIPLEX 7010	5.3		
Serial/Vin Number:	H715CY1	Indicate if a photo is included		
Describe the reason for o	deletion (Include replacement criteria in	f part of the Fleet Replacement Pro	ogram):	
Surplus recycle out of da	nte.			
If an election was made	to offer the property to other governme	ntal units or private nonprofit age	ncies per Florida Statute 2	74.05, please
indicate which agencies:	5 			
Indicate how the propert	y will be disposed of:			
Trade-In:	(Please include trade-in documents)			
Destroy:	Indicate how and by whom:			
Auction:	Where:	Amou	nt Received:	
Other: X	Please describe: Recycling	g E-Scrap		
Department Head Signat	ure:	Mao Date:	10/16/18	
TO BE COMPLETE	ED BY FINANCIAL SERVICES	<u>3:</u>		
Asset Number:	20140109	Acquisition Cost:	\$767.50	
Acquisition Date:	10/08/2013	Book Value:	-0-	
Financial Services Signa	ature: Xari	llemen Wate:	10/44/18	
BOARD APPROVA	<u>L:</u>	O =		
Board of County Commi	ssioners Chair:	·		
Ex-Officio Clerk to the E	Board of County Commissioners:			
		Date		
TO BE COMPLETE	CD AFTER DISPOSAL:			
Signature of Person Dist	posing of the Property:		Da	te:

10/24/2018 09:42 | BOARD OF COMMISSIONERS 6235kulm | FIXED ASSET WORKSHEET

ASSET # 20140	109		MASTER ASSET			DESCRIPTION	OPTI	PLEX 7	7010				
CLASS	40	MACHINERY & EQU	FUND SOURCE	01									
SUBCL	116	COMPUTER	ACQUIS METH	A1	PURCHASE	MAINT CONT	Y			INSURED	N		
COMMODITY						VENDOR DESC	Vend	lor Nam	ne Mi	CARRIER			
DEPT	0629	HEALTH DEPT-HIL	ACQUIS DATE		10/08/2013	TYPE	G			INSURED VAL			0.00
LOC CODE	253	HEALTH DEPT-HIL	ACQUIS COST		767.50	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	DEL:	L								
STATUS	A A	ACTIVE											
CONDITION	E E	EXCELLENT	SOY BOOK		0.00	DEPRECIATE		Y					
CUSTODIAN	DEPI	HEAD	CURRENT BOOK		0.00	DEPREC PRIN			767.	50			
TITLEHOLDER			EST SALVAGE		0.00	FIRST YR/PR		2014/0)1	LAST YR/PR	2	2016/12	
			REPL COST		767.50	EST LIFE		3					
TAG # 07649)		LAST INVENT			PERIODS TAKE	EN	3	36				
SERIAL #	H715	SCY1	IMPRO	VE M	EMO	ACCUM DE	EPREC		767.	50			
MANUFACTURER	DELI	DELL											
MODEL	OPTI	PLEX 7010	RETIRE DATE										
MODEL YEAR			DISP CODE										
LICENSE #			DISP PRICE		0.00								
			SALE PRICE		0.00								
VEND # PC	#	DOCUMENT #	INVOICE #		INV DATE	INV AMT							

G/L Accounts

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

PO Accounts

_____ ORG OBJ PROJ AMOUNT

DI# 2019-014

DEPARTMENT:	Health Department		DI#_2019-014
TO BE COMPLETE	ED BY DEPARTMENT:	2010 OCT 17 PM 4: 49	
Property Number:	Mileage	/ Hours if applicable:	
Year/Description:	OPTIPLEX 7010	9 (-) (-)	
Serial/Vin Number:	DFH9H72 Indicate	if a photo is included	
Describe the reason for d	eletion (Include replacement criteria if part of the	Fleet Replacement Program):	
Surplus recycle out of da	te.		
	o offer the property to other governmental units or	r private nonprofit agencies per Florida Statute 27	4.05, please
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 Signatu	ire: Shmas	Date: <u>10/16/18</u>	
TO BE COMPLETE	D BY FINANCIAL SERVICES:		
Asset Number:	20160042 Acquisit	tion Cost: \$1,275.00	
Acquisition Date:	01/14/2016 Book Va	slue: \$141.66	
Financial Services Signat	ture: <u>Siani lles</u>	me Wate: 10/4/18	i
BOARD APPROVAL	<u></u>		
Board of County Commis	sioners Chair:		
Ex-Officio Clerk to the Bo	oard of County Commissioners:	<u>:</u>	
TO BE COMPLETE	D AFTER DISPOSAL:	Date	
Signature of Person Dispe	osing of the Property:	Date	e:

10/24/2018 09:42 | BOARD OF COMMISSIONERS 6235kulm | FIXED ASSET WORKSHEET

ASSET # 20160042	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 0629 HEALTH DEPT-HI	L ACQUIS DATE	01/14/2016	TYPE G	INSURED VAL 0.00
LOC CODE 253 HEALTH DEPT-HIL	ACQUIS COST	1,275.00	EXPIRE DATE	EXPIRE DATE
LOC MEMO	ACRES	0.000	ANNUAL COST 0.0	0 POLICY CST 0.00
ROOM	QTY 1		MEMO	MEMO
STORAGE LOC	UNIT PRICE	0.00		
	PURCH MEMO DEI	LL		
STATUS A ACTIVE				
CONDITION E EXCELLENT	SOY BOOK	531.22	DEPRECIATE Y	
CUSTODIAN DEPT HEAD	CURRENT BOOK	141.66	DEPREC PRIN 1,27	5.00
TITLEHOLDER	EST SALVAGE	0.00	FIRST YR/PR 2016/04	LAST YR/PR 2018/11
	REPL COST	1,275.00	EST LIFE 3	
TAG # 08713	LAST INVENT		PERIODS TAKEN 32	
SERIAL # DFH9H72	IMPROVE N	MEMO	ACCUM DEPREC 1,13	3.34
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	

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