

CERTIFIED COPY OF ORDER

STATE OF MISSOURI }
County of Boone } ea.

October Session of the October Adjourned

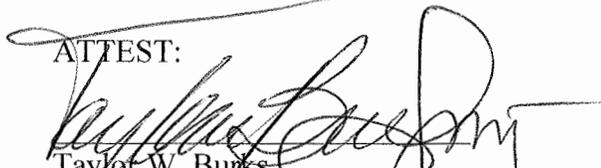
Term. 20 18

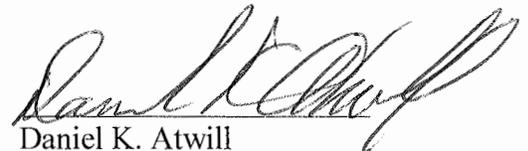
In the County Commission of said county, on the 25th day of October 20 18

the following, among other proceedings, were had, viz:

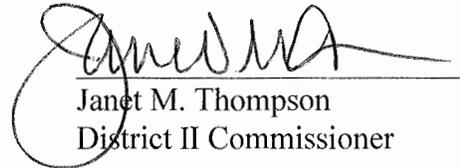
Now on this day the County Commission of the County of Boone does hereby authorize the Presiding Commissioner to sign the attached Finding of Public Nuisance and Order for Abatement of a public nuisance located at 7631 Zack Road, parcel #12-204-10-01-011.00 01.

Done this 25th day of October, 2018.

ATTEST:

Taylor W. Burks
Clerk of the County Commission


Daniel K. Atwill
Presiding Commissioner

Absent
Fred J. Parry
District I Commissioner


Janet M. Thompson
District II Commissioner

**BEFORE THE COUNTY COMMISSION OF
BOONE COUNTY, MISSOURI**

In Re: Nuisance Abatement)	October Session
7631 Zack Road)	October Adjourned
Columbia, MO)	Term 2018
)	Commission Order No. <u>472-2018</u>

FINDING OF PUBLIC NUISANCE AND ORDER FOR ABATEMENT

NOW on this 25th day of October 2018, the County Commission of Boone County, Missouri met in regular session and entered the following findings of fact, conclusions of law and order for abatement of nuisance:

Findings of Fact and Conclusions of Law

The County Commission finds as fact and concludes as a matter of law the following:

1. The Boone County Code of Health Regulations (the "Code") are officially noticed and are made a part of the record in this proceeding.
2. The City of Columbia/Boone County Health Department administrative record is made a part of the record in this proceeding and incorporated herein by reference. In addition, any live testimony of the official(s) of the department and other interested persons are made a part of the record in this proceeding.
3. A public nuisance exists described as follows: junk, trash, rubbish, garbage and other refuse on the premises.
4. The location of the public nuisance is as follows: 7631 Zack Road, Columbia, MO, a/k/a parcel# 12-204-10-01-011.00 01, Valley Park Subdivision, Lot 1, Section 10, Township 49, Range 12 as shown by deed book 2694 page 0104, Boone County
5. The specific violation of the Code is junk, trash, rubbish, garbage and other refuse in violation of section 6.5 of the Code.
6. The Health Director's designated Health Official made the above determination of the existence of the public nuisance at the above location. Notice of that determination and the requirement for abatement was given in accordance with section 6.10.1 of the Code on the 24th day of September 2018, to the property owner.
7. The above described public nuisance was not abated. As required by section 6.10.2 of the Code, the property owner was given notice of the hearing conducted this date before the Boone County Commission for an order to abate the above nuisance at government expense with the cost and expense thereof to be charged against the above described property as a special tax bill and added to the real estate taxes for said property for the current year.
8. No credible evidence has been presented at the hearing to demonstrate that no public nuisance exists or that abatement has been performed or is unnecessary; accordingly, in accordance with section 6.10.2 of the Code and section 67.402, RSMo, the County

Commission finds and determines from the credible evidence presented that a public nuisance exists at the above location which requires abatement and that the parties responsible for abating such nuisance have failed to do so as required by the Health Director or Official's original order referred to above.

Order For Abatement Chargeable As a Special Assessment To The Property

Based upon the foregoing, the County Commission hereby orders abatement of the above described public nuisance at public expense and the Health Director is hereby authorized and directed to carry out this order.

It is further ordered and directed that the Health Director submit a bill for the cost and expense of abatement to the County Clerk for attachment to this order and that the County Clerk submit a certified copy of this order and such bill to the County Collector for inclusion as a special assessment on the real property tax bill for the above described property for the current year in accordance with section 67.402, RSMo.

WITNESS the signature of the presiding commissioner on behalf Boone County Commission on the day and year first above written.

Boone County, Missouri
By Boone County Commission



Presiding Commissioner

ATTEST:



Boone County Clerk

Photographs taken 10/19/18 @ ~ 2:40 pm

7631 Zack Road

Trash, junk, and other refuse on the property





Amanda Matticks
7631 North Zack Road
Health Department nuisance notice - timeline

- 9/12/18: citizen complaint received
- 9/14/18: citizen complaint received
- 9/18/18: initial inspection conducted
- 9/19/18: notice of violation sent to owner, return receipt requested
- 9/24/18: owner notice received
- 10/09/18: reinspection conducted – violation not abated
- 10/17/18: hearing notice sent
- 10/18/18: Owner contacted health department via telephone
- 10/19/18: reinspection conducted – met with owner on site - violation not abated - photographs taken at ~ 2:40 pm

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:

MATTICKS AMANDA ERIN
631 ZACK RD
COLUMBIA MO 65202



Article Number (Transfer from service label)
2680 0000 8832 2110

COMPLETE THIS SECTION ON DELIVERY

A. Signature
Amanda Matticks Agent Addressee
B. Received by (Printed Name) *Amanda Matticks* C. Date of Delivery *9/24/10*

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Insured Mail
 - Insured Mail Restricted Delivery (over \$500)
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Return Receipt for Merchandise
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

7017 2680 0000 8832 2110

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, as appropriate)

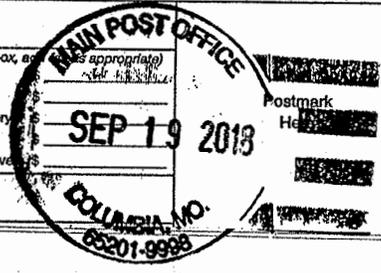
- Return Receipt (hardcopy)
- Return Receipt (electronic)
- Certified Mail Restricted Delivery
- Adult Signature Required
- Adult Signature Restricted Delivery

Postage \$ *6.67*

Total Postage and Fees \$

Sent To
Street and Apt. No. *MATTICKS AMANDA ERIN*
7631 ZACK RD
City, State, ZIP+4 *COLUMBIA MO 65202*

PS Form 3800, 11-2010





CITY OF COLUMBIA/BOONE COUNTY, MISSOURI



DEPARTMENT OF PUBLIC HEALTH AND HUMAN SERVICES
DIVISION OF ENVIRONMENTAL HEALTH

HEARING NOTICE

MATTICKS AMANDA ERIN
7631 ZACK RD
COLUMBIA, MO 65202

An inspection of the property you own located at 7631 Zack Road (parcel # 12-204-10-01-011.00 01) was conducted on October 9 , 2018 and revealed junk, trash, rubbish, garbage and other refuse on the premises. This condition was declared to be a nuisance and a violation of Boone County Public Nuisance Ordinance Section 6.5.

You are herewith notified that a hearing will be held before the County Commission on Thursday, October 25, 2018 at 1:30 p.m. in the County Commission Chambers at the Boone County Government Center, 801 E. Walnut Street, Columbia, Missouri. The purpose of this hearing will be to determine whether a violation exists. If the County Commission determines that a violation exists, it will order the violation to be abated.

If the nuisance is not removed as ordered, any property contributing to the nuisance is deemed forfeited, and the County Commission may have the nuisance seized, removed, and abated. All costs of seizure, removal, and abatement, plus administrative fees, will be assessed against the property in a tax bill. **If the above nuisance condition has been corrected prior to the hearing, you do not have to appear for the hearing.**

The purpose of these ordinances is to create and maintain a cleaner, healthier community. If you have any questions, please do not hesitate to contact our office. If you are not the owner or the person responsible for the care of this property, please call our office at the number listed at the bottom of this letter.

Sincerely,

Garth Baker
Environmental Public Health Specialist

This notice deposited in the U.S. Mail, first class postage paid on the 17th day of October 2018 by ja

1005 W. Worley • P.O. Box 6015 • Columbia, Missouri 65205-6015
Phone: (573) 874-7346 • TTY: (573) 874-7356 • Fax: (573) 817-6407
www.GoColumbiaMo.com



CITY OF COLUMBIA/BOONE COUNTY, MISSOURI



HEALTH DEPARTMENT
DIVISION OF ENVIRONMENTAL HEALTH

NOTIFICATION OF DETERMINATION OF PUBLIC HEALTH HAZARD AND/OR NUISANCE AND ORDER FOR ABATEMENT

MATTICKS AMANDA ERIN
7631 ZACK RD
COLUMBIA, MO 65202

An inspection of the property you own located at 7631 N ZACK RD (parcel # 12-204-10-01-011.00 01) was conducted on September 18, 2018 and revealed trash, junk, and other refuse on the property.

This condition is hereby declared to be a public nuisance. You are herewith notified that you must begin correcting this condition within 7 days of receipt of this notice and order and that if the above nuisance condition has not been fully corrected within **15 days** after the receipt of this notice, an additional enforcement action will result for violation of Boone County Public Nuisance Ordinance Section 6.5. A reinspection will be conducted at the end of the 15-day period. If the above nuisance condition has not been fully corrected by that time, a hearing before the Boone County Commission will be called to determine whether a violation exists. If the County Commission determines that a violation exists and the nuisance has not been removed as ordered under this notice, any property contributing to the nuisance is deemed forfeited, and the County Commission may have the nuisance seized, removed, and abated with the cost of such seizure, removal and abatement, plus administrative fees, charged against the property in a special tax bill. In addition, a complaint may be filed against you in Circuit Court. **If the above nuisance condition has been corrected within the 15-day period, no further action is necessary.**

The purpose of these ordinances is to create and maintain a cleaner, healthier community. If you have any questions, please do not hesitate to contact our office. If you are not the owner or the person responsible for the care of this property, please call our office at the number listed at the bottom of this letter. Your cooperation is greatly appreciated.

Sincerely,

Garth Baker
Environmental Public Health Specialist

This notice deposited in the U.S. Mail certified, return receipt requested on the 19th day of September 2018 by VJA.

1005 W. Worley ♦ P.O. Box 6015 ♦ Columbia, Missouri 65205-6015
Phone: (573) 874-7346 ♦ TTY: (573) 874-7356 ♦ Fax: (573) 817-6407
www.GoColumbiaMo.com

Tom Schauwecker Assessor

Parcel 12-204-10-01-011.00 01

Property Location 7631 N ZACK RD

City	Road	COMMON ROAD DISTRICT (CO)	School	HALLSVILLE (R4)
Library	COL BC LIBRARY (L4)	Fire	BOONE COUNTY (F1)	

Owner	MATTICKS AMANDA ERIN	Subdivision Plat Book/Page	0011 0310
Address	7631 ZACK RD	Section/Township/Range	10 49 12
Care Of		Legal Description	VALLEY PARK SD
City, State, Zip	COLUMBIA, MO 65202		LOT 1
		Lot Size	.00 x .00
		Irregular Shape	
		Deeded Acreage	.00
		Calculated Acreage	2.20
		Deed Book/Page	2694 0104 0471 0805

CURRENT APPRAISED

Type	Land	Bldgs	Total
RI	14,800	86,500	101,300
Totals	14,800	86,500	101,300

CURRENT ASSESSED

Type	Land	Bldgs	Total
RI	2,812	16,435	19,247
Totals	2,812	16,435	19,247

RESIDENCE DESCRIPTION

Year Built	1979
Use	SINGLE FAMILY (101)
Basement	FULL (4)
Attic	NONE (1)
Bedrooms	4
Main Area	1,184
Full Bath	2
Finished Basement Area	192
Half Bath	0
Total Rooms	6
Total Square Feet	1,376

Boone County Assessor

801 E. Walnut St., Rm 143
Columbia, MO 65201-7733

assessor@boonecountymo.org

Office (573) 886-4251
Fax (573) 886-4254

Boone County, Missouri

Unofficial Document



Recorded in Boone County, Missouri

Date and Time 04/01/2005 at 09:35:12 AM

Instrument # 2005007803 Book 2694 Page 104

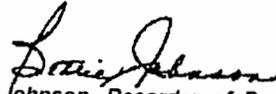
Grantor CHISHOLM, ROBERT A

Grantee MATTICKS, AMANDA ERIN

Instrument Type WD

Recording Fee \$27.00 S

No of Pages 2


Bettie Johnson, Recorder of Deeds



File Number: 214696

GENERAL WARRANTY DEED

This Deed, Made and entered on March 31, 2005 by and between

Robert A. Chisholm and Glenna S. Chisholm, husband and wife, of the County of Boone, State of Missouri, Party or Parties of the First Part, GRANTOR, and

Amanda Erin Matticks, a single person whose mailing address is: 7631 Zack Rd., Columbia, MO, 65202 Party or Parties of Second Part, GRANTEE.

WITNESSETH, that the said party of the first part, for and in consideration of the sum of One Dollar (\$1.00) and other valuable considerations paid by the said party or parties of the second part, the receipt of which is hereby acknowledged, does by these presents GRANT, BARGAIN SELL, CONVEY AND CONFIRM unto the said party or parties of the second part, the following described Real Estate, situated in the County of BOONE and State of Missouri, to-wit:

Lot One (1) of Valley Park Subdivision as shown by plat thereof recorded in Plat Book 11, page 310, records of Boone County, Missouri.

Also known as: 7631 Zack Rd., Columbia, MO, 65202

Subject to building lines, conditions, restrictions, and easements, and zoning regulations of record, if any.

TO HAVE AND TO HOLD the same, together with all rights and appurtenances to the same belonging, unto the said party or parties of the second part, and to the heirs and assigns of such party or parties forever.

The said party or parties of the first part hereby covenanting that said party or parties and their heirs, executors and administrators of such party or parties, shall and will WARRANT AND DEFEND the title to the premises unto the said party or parties of the second part, and to the heirs and assigns of such party or parties forever, against the lawful claims of all persons whomsoever, excepting, however, the general taxes for the calendar year 2005 and thereafter, and special taxes becoming a lien after the date of this deed.

IN WITNESS WHEREOF, the said party of the first part have hereunto set their hand or hands the day and year first above written.

Robert A. Chisholm
Robert A. Chisholm

Glenna S. Chisholm
Glenna S. Chisholm

STATE OF MISSOURI)
)ss
COUNTY OF BOONE)

On March 31, 2005, before me personally appeared Robert A. Chisholm and Glenna S. Chisholm, husband and wife to me known to be the person(s) described in and who executed the foregoing instrument, and acknowledged that he/she/they executed the same as his/her/their free act and deed.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed by official seal in the County and State aforesaid, the day and year first above written.

Suzanne Ayers
Notary Public

My term expires: _____
SUZANNE L. AYERS
Notary Public - Notary Seal
State of Missouri
County of Cooper
My Commission Expires July 28, 2007

Boone County Purchasing

Melinda Bobbitt, CPPO
Director of Purchasing



613 E. Ash St, Room 110
Columbia, MO 65201
Phone: (573) 886-4391
Fax: (573) 886-4390

MEMORANDUM

TO: Boone County Commission
FROM: Melinda Bobbitt, CPPO, CPPB
DATE: October 12, 2018
RE: Contract: *46-30SEP18C – Antenna Corral on Centralia Water Tower*

Dave Dunford, on behalf of Boone County as our Radio Consultant, requests that we enter into a contract with Ozark Applicators, L.L.C. of Van Buren, Missouri. The work includes the installation of the pre-made antenna corral on the 500,000 gallon elevated water tower located in Centralia, Missouri.

A requirement of the City of Centralia, the owner of the tower request, is that the installation work be done by their vendor, Ozark Applicators, L.L.C.

Cost of services is \$14,500 and will be paid from 2704 – Radio Network Operations, 60200 –Equipment Repairs/Maintenance. \$32,500 is budgeted for the entire project.

cc: Chad Martin, Patricia Schreiner, Joint Communications
Dave Dunford, Radio Consultant
Contract File

CERTIFIED COPY OF ORDER

STATE OF MISSOURI }
County of Boone } ea.

October Session of the October Adjourned

Term. 20 18

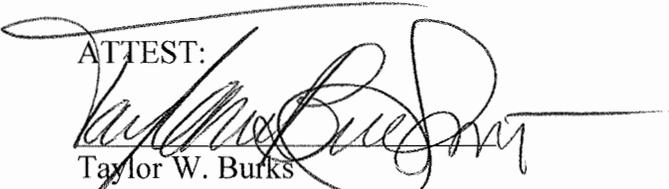
In the County Commission of said county, on the 25th day of October 20 18

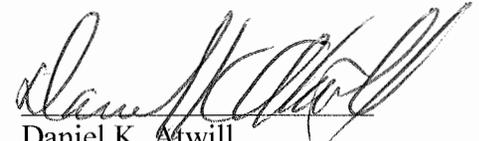
the following, among other proceedings, were had, viz:

Now on this day the County Commission of the County of Boone does hereby award contract 46-30SEP18C – Antenna Corral on Centralia Water Tower to Ozark Applicator, L.L.C. of Van Buren, Missouri.

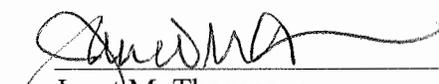
Terms of the contract award are stipulated in the attached Contract Agreement. It is further ordered the Presiding Commissioner is hereby authorized to sign said Contract Agreement.

Done this 25th day of October, 2018.

ATTEST:

Taylor W. Burks
Clerk of the County Commission


Daniel K. Atwill
Presiding Commissioner

Absent
Fred J. Parry
District I Commissioner


Janet M. Thompson
District II Commissioner

CONTRACT AGREEMENT

THIS AGREEMENT made and entered into by and between the County of Boone through the Boone County Commission (hereinafter referred to as the Owner), and **Ozark Applicators, L.L.C.**, (hereinafter referred to as the Contractor).

WITNESSETH: That for and in consideration of the acceptance of Contractor's quote and the award of this contract to said Contractor by the Owner and in further consideration of the agreements of the parties herein contained, to be well and truly observed and faithfully kept by them, and each of them, it is agreed between the parties as follows, to wit:

The Contractor at his own Expense hereby agrees to do or furnish all labor, materials, welder, and equipment for the provision of installation of the pre-made antenna corral on the 500,000-gallon elevated water tower located in Centralia, Missouri for the Boone County Joint Communications office.

CONTRACT NUMBER 46-30SEP18C

Installation of the pre-made antenna corral on 500,000-gallon elevated water tower in Centralia, Missouri BOONE COUNTY, MISSOURI

and agrees to perform all the work required by the contract as shown on the attached quote and as listed below.

For the furnishing of all labor, materials, welder, and equipment for the provision of installation of the pre-made antenna corral on the 500,000-gallon elevated water tower in Centralia, Missouri. Furnish materials and labor to touch up all painted areas interior and exterior on the tower. Assist in lifting the pre-constructed corral with a crane at the location.

The contract total for the work stated above is to be in the amount of \$14,500.00.

The following contract documents are made a part hereof as fully as if set out herein. Change orders issued subsequent to this contract shall be subject to the terms and conditions of the agreement unless otherwise specified in writing.

Ozark Applicators, L.L.C. quote #83, dated September 24, 2018
Certification Regarding Debarment
Insurance Requirements
Work Authorization Certification
Boone County Standard Terms and Conditions

The Contractor further agrees that he is fully informed regarding all of the conditions affecting the work to be done, and labor and materials to be furnished for the completion of this contract, and that his information was secured by personal investigation and research and not from any estimates of the Owner; and that he will make no claim against the Owner by reason of estimates, tests, or representation of any officer, agent, or employees of the Owner.

The said Contractor agrees further to begin work within 90 working days after receipt of Notice to Proceed, and to complete the work within 111 working days, weathering permitting following the guidelines of the material or such additional time as may be allowed by the Joint Communications Department under the contract.

The work shall be done to complete satisfaction of the Owner and, in the case the Federal Government or any agency thereof is participating in the payment of the cost of construction of the work, the work shall also be subject to inspection and approval at all times by the proper agent or officials of such government agency.

The parties hereto agree that this contract in all things shall be governed by the laws of the State of Missouri.

The contractor agrees that he will comply with all federal, state, and local laws, regulations, and ordinances, and that he will cause each of his subcontractors to do the same. The contractor also agrees not to discriminate against any person on the grounds of race, color, religion, creed, sex, age, ancestry, or national origin in connection with this contract, including procurement of materials and equipment, and will cause each of his subcontractors to do the same.

The Contractor expressly warrants that he has employed no third person to solicit or obtain this contract in his behalf, or to cause or procure the same to be obtained upon compensation in any way contingent, in whole or in part, upon such procurement. Also, that he has not paid, or promised or agreed to pay to any third person, in consideration of such procurement, or in compensation for services in connection therewith, any brokerage, commission or percentage upon the amount receivable by he hereunder; and that he has not, in estimating the contract price demand by him, included any sum by reason of any such brokerage, commission, or percentage; and that all moneys payable to him hereunder are free from obligation of any other person for services rendered, or supposed to have been rendered, in the procurement of this contract. Contractor further agrees that any breach of this warranty shall constitute adequate cause for the annulment of this contract by the Owner, and that the Owner may retain to its own use from any sums due to or to become due hereunder an amount equal to any brokerage, commission, or percentage so paid, or agreed to be paid.

The Contractor is aware of the provisions of the Overhead Power Line Safety Act, 319.075 to 319.090 RSMo, and agrees to comply with the provisions thereof. Contractor understands that is their duty to notify any utility operating high voltage overhead lines and make appropriate arrangements with said utility if the performance of contract would cause any activity within ten feet of any high voltage overhead line. To the fullest extent permitted by law, Contractor shall indemnify, hold harmless and defend the County, its directors, officers, agents, and employees from and against all claims, damages, losses and expenses (including but not limited to attorney's fees) arising by reason of any act or failure to act, negligent or otherwise, of Contractor, of any subcontractor (meaning anyone, including but not limited to consultants having a contract with contractor or a subcontract for part of the services), of anyone directly or indirectly employed by contractor or by any subcontractor, or of anyone for whose acts the contractor or its subcontractor may be liable, in connection with any claims arising under the Overhead Power Line Safety Act. Contractor expressly waives any action for Contribution against the County on behalf of the Contractor, any subcontractor (meaning anyone, including but not limited to consultants having a contract with contractor or a subcontract for part of the services), anyone directly or indirectly employed by contractor or by any subcontractor, or of anyone for whose acts the contractor or its subcontractor may be liable, and agrees to provide a copy of this waiver to any party affected by this provision.

The Owner agrees to pay the Contractor in the amount:

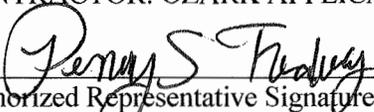
Fourteen Thousand Five Hundred Dollars and Zero Cents (\$14,500.00)

as full compensation for the performance of work embraced in this contract, subject to the terms of payment as provided in the contract documents and subject to adjustment as provided for changes in quantities and approved change orders.

IN WITNESS WHEREOF, the parties hereto have signed and entered this agreement on
10-25-18 at Columbia, Missouri.
(Date)

CONTRACTOR: OZARK APPLICATORS, L.L.C.

OWNER, BOONE COUNTY, MISSOURI

By: 
Authorized Representative Signature

By: 
Daniel K. Atwill, Presiding Commissioner

By: Penny S. Treadway
Authorized Representative Printed Name
Title: Owner

Approved as to Legal Form:


Boone County Counselor

ATTEST:


County Clerk

AUDITOR CERTIFICATION

In accordance with RSMo 50.660, I hereby certify that a sufficient unencumbered appropriation balance exists and is available to satisfy the obligation(s) arising from this contract. (Note: Certification of this contract is not required if the terms of the contract do not create a measurable county obligation at this time.)

2704-60200 - \$14,500

 by jj 10/16/2018
Signature Date Appropriation Account

Insurance Requirements: The Contractor shall not commence work under this contract until they have obtained all insurance required under this paragraph and the Certificate of Insurance has been approved by the County, nor shall the Contractor allow any subcontractor to commence work on their subcontract until all similar insurance required of subcontractor has been so obtained and approved. All policies shall be in amounts, form and companies satisfactory to the County which must carry an A-6 or better rating as listed in the A.M. Best or equivalent rating guide. Insurance limits indicated below may be lowered at the discretion of the County.

Employers Liability and Workers Compensation Insurance - The Contractor shall take out and maintain during the life of this contract, **Employers Liability and Workers Compensation Insurance** for all of its employees employed at the site of work, and in case any work is sublet, the Contractor shall require the subcontractor similarly to provide Workers Compensation Insurance for all of the latter's employees unless such employees are covered by the protection afforded by the Contractor. Workers Compensation coverage shall meet Missouri statutory limits. Employers Liability limits shall be \$500,000.00 each employee, \$500,000.00 each accident, and \$500,000.00 policy limit. In case any class of employees engaged in hazardous work under this Contract at the site of the work is not protected under the Workers Compensation Statute, the Contractor shall provide and shall cause each subcontractor to provide Employers Liability Insurance for the protection of their employees not otherwise protected.

Commercial General Liability Insurance - The Contractor shall take out and maintain during the life of this contract, such commercial general liability insurance as shall protect it and any subcontractor performing work covered by this contract, from claims for damages for personal injury including accidental death, as well as from claims for property damages, which may arise from operations under this contract, whether such operations be by themselves or for any subcontractor or by anyone directly or indirectly employed by them. The amounts of insurance shall be not less than \$3,000,000.00 combined single limit for any one occurrence covering both bodily injury and property damage, including accidental death. If the Contract involves any underground/digging operations, the general liability certificate shall include X, C, and U (Explosion, Collapse, and Underground) coverage. If providing Commercial General Liability Insurance, then the Proof of Coverage of Insurance shall also be included.

Contractor may satisfy the minimum liability limits required for Commercial General Liability or Business Auto Liability under an Umbrella or Excess Liability policy. There is no minimum per occurrence limit of liability under the umbrella or Excess Liability; however, the Annual Aggregate limit shall not be less than the highest "Each Occurrence" limit for either Commercial General Liability or Business Auto Liability. **Contractor agrees to endorse the County as an Additional Insured on the umbrella or Excess Liability, unless the Certificate of Insurance state the Umbrella or Excess Liability provides coverage on a "Follow-Form" basis.**

Business Automobile Liability – The Contractor shall maintain during the life of this contract, automobile liability insurance in the amount of not less than \$3,000,000.00 combined single limit for any one occurrence, covering both bodily injury, including accidental death, and property damage, to protect themselves from any and all claims arising from the use of the Contractor's own automobiles, teams and trucks; hired automobiles, teams and trucks; non-owned and both on and off the site of work.

Subcontractors: Contractor shall cause each Subcontractor to purchase and maintain insurance of the types and amounts specified herein. Limits of such coverage may be reduced only upon written agreement of County. Contractor shall provide to County copies of certificates of insurance evidencing coverage for each Subcontractor. Subcontractors' commercial general liability and business automobile

liability insurance shall name County as Additional Insured and have the Waiver of Subrogation endorsements added.

Proof of Carriage of Insurance - The Contractor shall furnish the County with Certificate(s) of Insurance which name the County as additional insured in an amount as required in this contract). The Certificate of Insurance shall provide that there will be no cancellation, non-renewal or reduction of coverage without 30 days prior written notice to the County. In addition, such insurance shall be on an occurrence basis and shall remain in effect until such time as the County has made final acceptance of the services provided.

INDEMNITY AGREEMENT: To the fullest extent permitted by law, Contractor shall indemnify, hold harmless and defend the County, its directors, officers, agents, and employees from and against all claims, damages, losses and expenses (including but not limited to attorney's fees) arising by reason of any act or failure to act, negligent or otherwise, of Contractor, of any subcontractor (meaning anyone, including but not limited to consultants having a contract with contractor or a subcontract for part of the services), of anyone directly or indirectly employed by contractor or by any subcontractor, or of anyone for whose acts the contractor or its subcontractor may be liable, in connection with providing these services. This provision does not, however, require contractor to indemnify, hold harmless, or defend the County of Boone from its own negligence.

Nothing in these requirements shall be construed as a waiver of any governmental immunity of the County, its officials nor any of its employees in the course of their official duties.

Failure to maintain the required insurance in force may be cause for contract termination. In the event the Agency/Service fails to maintain and keep in force the required insurance or to obtain coverage from its subcontractors, the County shall have the right to cancel and terminate the contract without notice.

Certificate Holder address:

County of Boone, Missouri
C/O Purchasing Department
613 E. Ash Street
Columbia, MO 65201



Estimate

DATE	ESTIMATE NO.
9/24/2018	83

BOONE COUNTY 911

DESCRIPTION	QTY	U/M	COST	TOTAL
WE WILL FURNISH LABOR, WELDER AND ALL SUPPLIES NECESSARY TO INSTALL THE PRE-MADE ANTENNA CORRAL ON THE 500,000 GALLON ELEVATED WATER TOWER LOCATED IN CENTRALIA, MO. WE WILL FURNISH MATERIALS TO TOUCH UP ALL PAINTED AREAS INTERIOR AND EXTERIOR ON THE TOWER. WE UNDERSTAND WE WILL BE ASSISTED IN LIFTING THE PRE CONSTRUCTED CORRAL WITH A CRANE AT THE LOCATION.			14,500.00	14,500.00

TOTAL	\$14,500.00
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Phone #	Fax #	E-mail	Web Site
573-323-6450	573-323-0055	tankpainters@yahoo.com	www.watertowerpainting.com



Company ID Number: 230496

THE E-VERIFY PROGRAM FOR EMPLOYMENT VERIFICATION MEMORANDUM OF UNDERSTANDING

ARTICLE I

PURPOSE AND AUTHORITY

This Memorandum of Understanding (MOU) sets forth the points of agreement between the Department of Homeland Security (DHS) and **Ozark Applicators, LLC** (Employer) regarding the Employer's participation in the Employment Eligibility Verification Program (E-Verify). This MOU explains certain features of the E-Verify program and enumerates specific responsibilities of DHS, the Social Security Administration (SSA), and the Employer. E-Verify is a program that electronically confirms an employee's eligibility to work in the United States after completion of the Employment Eligibility Verification Form (Form I-9). For covered government contractors, E-Verify is used to verify the employment eligibility of all newly hired employees and all existing employees assigned to Federal contracts.

Authority for the E-Verify program is found in Title IV, Subtitle A, of the Illegal Immigration Reform and Immigrant Responsibility Act of 1996 (IIRIRA), Pub. L. 104-208, 110 Stat. 3009, as amended (8 U.S.C. § 1324a note). Authority for use of the E-Verify program by Federal contractors and subcontractors covered by the terms of Subpart 22.18, "Employment Eligibility Verification", of the Federal Acquisition Regulation (FAR) (hereinafter referred to in this MOU as a "Federal contractor") to verify the employment eligibility of certain employees working on Federal contracts is also found in Subpart 22.18 and in Executive Order 12989, as amended.

ARTICLE II

FUNCTIONS TO BE PERFORMED

A. RESPONSIBILITIES OF SSA

1. SSA agrees to provide the Employer with available information that allows the Employer to confirm the accuracy of Social Security Numbers provided by all employees verified under this MOU and the employment authorization of U.S. citizens.
2. SSA agrees to provide to the Employer appropriate assistance with operational problems that may arise during the Employer's participation in the E-Verify program. SSA agrees to provide the Employer with names, titles, addresses, and telephone numbers of SSA representatives to be contacted during the E-Verify process.
3. SSA agrees to safeguard the information provided by the Employer through the E-Verify program procedures, and to limit access to such information, as is appropriate by law, to individuals responsible for the verification of Social Security Numbers and for evaluation of the E-Verify program or such other persons or entities who may be authorized by SSA as governed by the Privacy Act (5 U.S.C. § 552a), the Social Security Act (42 U.S.C. 1306(a)), and SSA regulations (20 CFR Part 401).

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4. SSA agrees to provide a means of automated verification that is designed (in conjunction with DHS's automated system if necessary) to provide confirmation or tentative nonconfirmation of U.S. citizens' employment eligibility within 3 Federal Government work days of the initial inquiry.

5. SSA agrees to provide a means of secondary verification (including updating SSA records as may be necessary) for employees who contest SSA tentative nonconfirmations that is designed to provide final confirmation or nonconfirmation of U.S. citizens' employment eligibility and accuracy of SSA records for both citizens and aliens within 10 Federal Government work days of the date of referral to SSA, unless SSA determines that more than 10 days may be necessary. In such cases, SSA will provide additional verification instructions.

B. RESPONSIBILITIES OF DHS

1. After SSA verifies the accuracy of SSA records for aliens through E-Verify, DHS agrees to provide the Employer access to selected data from DHS's database to enable the Employer to conduct, to the extent authorized by this MOU:

- Automated verification checks on alien employees by electronic means, and
- Photo verification checks (when available) on employees.

2. DHS agrees to provide to the Employer appropriate assistance with operational problems that may arise during the Employer's participation in the E-Verify program. DHS agrees to provide the Employer names, titles, addresses, and telephone numbers of DHS representatives to be contacted during the E-Verify process.

3. DHS agrees to provide to the Employer a manual (the E-Verify User Manual) containing instructions on E-Verify policies, procedures and requirements for both SSA and DHS, including restrictions on the use of E-Verify. DHS agrees to provide training materials on E-Verify.

4. DHS agrees to provide to the Employer a notice, which indicates the Employer's participation in the E-Verify program. DHS also agrees to provide to the Employer anti-discrimination notices issued by the Office of Special Counsel for Immigration-Related Unfair Employment Practices (OSC), Civil Rights Division, U.S. Department of Justice.

5. DHS agrees to issue the Employer a user identification number and password that permits the Employer to verify information provided by alien employees with DHS's database.

6. DHS agrees to safeguard the information provided to DHS by the Employer, and to limit access to such information to individuals responsible for the verification of alien employment eligibility and for evaluation of the E-Verify program, or to such other persons or entities as may be authorized by applicable law. Information will be used only to verify the accuracy of Social Security Numbers and employment eligibility, to enforce the Immigration and Nationality Act (INA) and Federal criminal laws, and to administer Federal contracting requirements.

7. DHS agrees to provide a means of automated verification that is designed (in conjunction with SSA verification procedures) to provide confirmation or tentative

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nonconfirmation of employees' employment eligibility within 3 Federal Government work days of the initial inquiry.

8. DHS agrees to provide a means of secondary verification (including updating DHS records as may be necessary) for employees who contest DHS tentative nonconfirmations and photo non-match tentative nonconfirmations that is designed to provide final confirmation or nonconfirmation of the employees' employment eligibility within 10 Federal Government work days of the date of referral to DHS, unless DHS determines that more than 10 days may be necessary. In such cases, DHS will provide additional verification instructions.

C. RESPONSIBILITIES OF THE EMPLOYER

1. The Employer agrees to display the notices supplied by DHS in a prominent place that is clearly visible to prospective employees and all employees who are to be verified through the system.

2. The Employer agrees to provide to the SSA and DHS the names, titles, addresses, and telephone numbers of the Employer representatives to be contacted regarding E-Verify.

3. The Employer agrees to become familiar with and comply with the most recent version of the E-Verify User Manual.

4. The Employer agrees that any Employer Representative who will perform employment verification queries will complete the E-Verify Tutorial before that individual initiates any queries.

A. The Employer agrees that all Employer representatives will take the refresher tutorials initiated by the E-Verify program as a condition of continued use of E-Verify, including any tutorials for Federal contractors if the Employer is a Federal contractor.

B. Failure to complete a refresher tutorial will prevent the Employer from continued use of the program.

5. The Employer agrees to comply with current Form I-9 procedures, with two exceptions:

- If an employee presents a "List B" identity document, the Employer agrees to only accept "List B" documents that contain a photo. (List B documents identified in 8 C.F.R. § 274a.2(b)(1)(B)) can be presented during the Form I-9 process to establish identity.) If an employee objects to the photo requirement for religious reasons, the Employer should contact E-Verify at 888-464-4218.
- If an employee presents a DHS Form I-551 (Permanent Resident Card) or Form I-766 (Employment Authorization Document) to complete the Form I-9, the Employer agrees to make a photocopy of the document and to retain the photocopy with the employee's Form I-9. The employer will use the photocopy to verify the photo and to assist DHS with its review of photo non-matches that are contested by employees. Note that employees retain the right to present any List A, or List B and List C, documentation to complete the Form I-9. DHS may in the future designate other documents that activate the photo screening tool.

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6. The Employer understands that participation in E-Verify does not exempt the Employer from the responsibility to complete, retain, and make available for inspection Forms I-9 that relate to its employees, or from other requirements of applicable regulations or laws, including the obligation to comply with the antidiscrimination requirements of section 274B of the INA with respect to Form I-9 procedures, except for the following modified requirements applicable by reason of the Employer's participation in E-Verify: (1) identity documents must have photos, as described in paragraph 5 above; (2) a rebuttable presumption is established that the Employer has not violated section 274A(a)(1)(A) of the Immigration and Nationality Act (INA) with respect to the hiring of any individual if it obtains confirmation of the identity and employment eligibility of the individual in compliance with the terms and conditions of E-Verify; (3) the Employer must notify DHS if it continues to employ any employee after receiving a final nonconfirmation, and is subject to a civil money penalty between \$550 and \$1,100 for each failure to notify DHS of continued employment following a final nonconfirmation; (4) the Employer is subject to a rebuttable presumption that it has knowingly employed an unauthorized alien in violation of section 274A(a)(1)(A) if the Employer continues to employ an employee after receiving a final nonconfirmation; and (5) no person or entity participating in E-Verify is civilly or criminally liable under any law for any action taken in good faith based on information provided through the confirmation system. DHS reserves the right to conduct Form I-9 compliance inspections during the course of E-Verify, as well as to conduct any other enforcement activity authorized by law.

7. The Employer agrees to initiate E-Verify verification procedures for new employees within 3 Employer business days after each employee has been hired (but after both sections 1 and 2 of the Form I-9 have been completed), and to complete as many (but only as many) steps of the E-Verify process as are necessary according to the E-Verify User Manual. The Employer is prohibited from initiating verification procedures before the employee has been hired and the Form I-9 completed. If the automated system to be queried is temporarily unavailable, the 3-day time period is extended until it is again operational in order to accommodate the Employer's attempting, in good faith, to make inquiries during the period of unavailability. In all cases, the Employer must use the SSA verification procedures first, and use DHS verification procedures and photo screening tool only after the SSA verification response has been given. Employers may initiate verification by notating the Form I-9 in circumstances where the employee has applied for a Social Security Number (SSN) from the SSA and is waiting to receive the SSN, provided that the Employer performs an E-Verify employment verification query using the employee's SSN as soon as the SSN becomes available.

8. The Employer agrees not to use E-Verify procedures for pre-employment screening of job applicants, in support of any unlawful employment practice, or for any other use not authorized by this MOU. Employers must use E-Verify for all new employees, unless an Employer is a Federal contractor that qualifies for the exceptions described in Article II.D.1.c. Except as provided in Article II.D, the Employer will not verify selectively and will not verify employees hired before the effective date of this MOU. The Employer understands that if the Employer uses E-Verify procedures for any purpose other than as authorized by this MOU, the Employer may be subject to appropriate legal action and termination of its access to SSA and DHS information pursuant to this MOU.

9. The Employer agrees to follow appropriate procedures (see Article III. below) regarding tentative nonconfirmations, including notifying employees of the finding, providing written referral instructions to employees, allowing employees to contest the finding, and not taking

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adverse action against employees if they choose to contest the finding. Further, when employees contest a tentative nonconfirmation based upon a photo non-match, the Employer is required to take affirmative steps (see Article III.B. below) to contact DHS with information necessary to resolve the challenge.

10. The Employer agrees not to take any adverse action against an employee based upon the employee's perceived employment eligibility status while SSA or DHS is processing the verification request unless the Employer obtains knowledge (as defined in 8 C.F.R. § 274a.1(l)) that the employee is not work authorized. The Employer understands that an initial inability of the SSA or DHS automated verification system to verify work authorization, a tentative nonconfirmation, a case in continuance (indicating the need for additional time for the government to resolve a case), or the finding of a photo non-match, does not establish, and should not be interpreted as evidence, that the employee is not work authorized. In any of the cases listed above, the employee must be provided a full and fair opportunity to contest the finding, and if he or she does so, the employee may not be terminated or suffer any adverse employment consequences based upon the employee's perceived employment eligibility status (including denying, reducing, or extending work hours, delaying or preventing training, requiring an employee to work in poorer conditions, refusing to assign the employee to a Federal contract or other assignment, or otherwise subjecting an employee to any assumption that he or she is unauthorized to work) until and unless secondary verification by SSA or DHS has been completed and a final nonconfirmation has been issued. If the employee does not choose to contest a tentative nonconfirmation or a photo non-match or if a secondary verification is completed and a final nonconfirmation is issued, then the Employer can find the employee is not work authorized and terminate the employee's employment. Employers or employees with questions about a final nonconfirmation may call E-Verify at 1-888-464-4218 or OSC at 1-800-255-8155 or 1-800-237-2515 (TDD).

11. The Employer agrees to comply with Title VII of the Civil Rights Act of 1964 and section 274B of the INA by not discriminating unlawfully against any individual in hiring, firing, or recruitment or referral practices because of his or her national origin or, in the case of a protected individual as defined in section 274B(a)(3) of the INA, because of his or her citizenship status. The Employer understands that such illegal practices can include selective verification or use of E-Verify except as provided in part D below, or discharging or refusing to hire employees because they appear or sound "foreign" or have received tentative nonconfirmations. The Employer further understands that any violation of the unfair immigration-related employment practices provisions in section 274B of the INA could subject the Employer to civil penalties, back pay awards, and other sanctions, and violations of Title VII could subject the Employer to back pay awards, compensatory and punitive damages. Violations of either section 274B of the INA or Title VII may also lead to the termination of its participation in E-Verify. If the Employer has any questions relating to the anti-discrimination provision, it should contact OSC at 1-800-255-8155 or 1-800-237-2515 (TDD).

12. The Employer agrees to record the case verification number on the employee's Form I-9 or to print the screen containing the case verification number and attach it to the employee's Form I-9.

13. The Employer agrees that it will use the information it receives from SSA or DHS pursuant to E-Verify and this MOU only to confirm the employment eligibility of employees as

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authorized by this MOU. The Employer agrees that it will safeguard this information, and means of access to it (such as PINS and passwords) to ensure that it is not used for any other purpose and as necessary to protect its confidentiality, including ensuring that it is not disseminated to any person other than employees of the Employer who are authorized to perform the Employer's responsibilities under this MOU, except for such dissemination as may be authorized in advance by SSA or DHS for legitimate purposes.

14. The Employer acknowledges that the information which it receives from SSA is governed by the Privacy Act (5 U.S.C. § 552a(i)(1) and (3)) and the Social Security Act (42 U.S.C. 1306(a)), and that any person who obtains this information under false pretenses or uses it for any purpose other than as provided for in this MOU may be subject to criminal penalties.

15. The Employer agrees to cooperate with DHS and SSA in their compliance monitoring and evaluation of E-Verify, including by permitting DHS and SSA, upon reasonable notice, to review Forms I-9 and other employment records and to interview it and its employees regarding the Employer's use of E-Verify, and to respond in a timely and accurate manner to DHS requests for information relating to their participation in E-Verify.

D. RESPONSIBILITIES OF FEDERAL CONTRACTORS

1. The Employer understands that if it is a Federal contractor subject to the employment verification terms in Subpart 22.18 of the FAR it must verify the employment eligibility of any "employee assigned to the contract" (as defined in FAR 22.1801) in addition to verifying the employment eligibility of all other employees required to be verified under the FAR. Once an employee has been verified through E-Verify by the Employer, the Employer may not reverify the employee through E-Verify.

a. Federal contractors not enrolled at the time of contract award: An Employer that is not enrolled in E-Verify as a Federal contractor at the time of a contract award must enroll as a Federal contractor in the E-Verify program within 30 calendar days of contract award and, within 90 days of enrollment, begin to use E-Verify to initiate verification of employment eligibility of new hires of the Employer who are working in the United States, whether or not assigned to the contract. Once the Employer begins verifying new hires, such verification of new hires must be initiated within 3 business days after the date of hire. Once enrolled in E-Verify as a Federal contractor, the Employer must initiate verification of employees assigned to the contract within 90 calendar days after the date of enrollment or within 30 days of an employee's assignment to the contract, whichever date is later.

b. Federal contractors already enrolled at the time of a contract award: Employers enrolled in E-Verify as a Federal contractor for 90 days or more at the time of a contract award must use E-Verify to initiate verification of employment eligibility for new hires of the Employer who are working in the United States, whether or not assigned to the contract, within 3 business days after the date of hire. If the Employer is enrolled in E-Verify as a Federal contractor for 90 calendar days or less at the time of contract award, the Employer must, within 90 days of enrollment, begin to use E-Verify to initiate verification of new hires of the contractor who are working in the United States, whether or not assigned to the contract. Such verification of new hires must be initiated within 3 business days after the date of hire. An Employer enrolled as a Federal contractor in E-Verify must initiate verification of each employee assigned to the



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contract within 90 calendar days after date of contract award or within 30 days after assignment to the contract, whichever is later.

c. Institutions of higher education, State, local and tribal governments and sureties: Federal contractors that are institutions of higher education (as defined at 20 U.S.C. 1001(a)), State or local governments, governments of Federally recognized Indian tribes, or sureties performing under a takeover agreement entered into with a Federal agency pursuant to a performance bond may choose to only verify new and existing employees assigned to the Federal contract. Such Federal contractors may, however, elect to verify all new hires, and/or all existing employees hired after November 6, 1986. The provisions of Article II.D, paragraphs 1.a and 1.b of this MOU providing timeframes for initiating employment verification of employees assigned to a contract apply to such institutions of higher education, State, local and tribal governments, and sureties.

d. Verification of all employees: Upon enrollment, Employers who are Federal contractors may elect to verify employment eligibility of all existing employees working in the United States who were hired after November 6, 1986, instead of verifying only those employees assigned to a covered Federal contract. After enrollment, Employers must elect to do so only in the manner designated by DHS and initiate E-Verify verification of all existing employees within 180 days after the election.

e. Form I-9 procedures for Federal contractors: The Employer may use a previously completed Form I-9 as the basis for initiating E-Verify verification of an employee assigned to a contract as long as that Form I-9 is complete (including the SSN), complies with Article II.C.5, the employee's work authorization has not expired, and the Employer has reviewed the information reflected in the Form I-9 either in person or in communications with the employee to ensure that the employee's stated basis in section 1 of the Form I-9 for work authorization has not changed (including, but not limited to, a lawful permanent resident alien having become a naturalized U.S. citizen). If the Employer is unable to determine that the Form I-9 complies with Article II.C.5, if the employee's basis for work authorization as attested in section 1 has expired or changed, or if the Form I-9 contains no SSN or is otherwise incomplete, the Employer shall complete a new I-9 consistent with Article II.C.5, or update the previous I-9 to provide the necessary information. If section 1 of the Form I-9 is otherwise valid and up-to-date and the form otherwise complies with Article II.C.5, but reflects documentation (such as a U.S. passport or Form I-551) that expired subsequent to completion of the Form I-9, the Employer shall not require the production of additional documentation, or use the photo screening tool described in Article II.C.5, subject to any additional or superseding instructions that may be provided on this subject in the E-Verify User Manual. Nothing in this section shall be construed to require a second verification using E-Verify of any assigned employee who has previously been verified as a newly hired employee under this MOU, or to authorize verification of any existing employee by any Employer that is not a Federal contractor.

2. The Employer understands that if it is a Federal contractor, its compliance with this MOU is a performance requirement under the terms of the Federal contract or subcontract, and the Employer consents to the release of information relating to compliance with its verification responsibilities under this MOU to contracting officers or other officials authorized to review the Employer's compliance with Federal contracting requirements.

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ARTICLE III

REFERRAL OF INDIVIDUALS TO SSA AND DHS

A. REFERRAL TO SSA

1. If the Employer receives a tentative nonconfirmation issued by SSA, the Employer must print the tentative nonconfirmation notice as directed by the automated system and provide it to the employee so that the employee may determine whether he or she will contest the tentative nonconfirmation.
2. The Employer will refer employees to SSA field offices only as directed by the automated system based on a tentative nonconfirmation, and only after the Employer records the case verification number, reviews the input to detect any transaction errors, and determines that the employee contests the tentative nonconfirmation. The Employer will transmit the Social Security Number to SSA for verification again if this review indicates a need to do so. The Employer will determine whether the employee contests the tentative nonconfirmation as soon as possible after the Employer receives it.
3. If the employee contests an SSA tentative nonconfirmation, the Employer will provide the employee with a system-generated referral letter and instruct the employee to visit an SSA office within 8 Federal Government work days. SSA will electronically transmit the result of the referral to the Employer within 10 Federal Government work days of the referral unless it determines that more than 10 days is necessary. The Employer agrees to check the E-Verify system regularly for case updates.
4. The Employer agrees not to ask the employee to obtain a printout from the Social Security Number database (the Numident) or other written verification of the Social Security Number from the SSA.

B. REFERRAL TO DHS

1. If the Employer receives a tentative nonconfirmation issued by DHS, the Employer must print the tentative nonconfirmation notice as directed by the automated system and provide it to the employee so that the employee may determine whether he or she will contest the tentative nonconfirmation.
2. If the Employer finds a photo non-match for an employee who provides a document for which the automated system has transmitted a photo, the employer must print the photo non-match tentative nonconfirmation notice as directed by the automated system and provide it to the employee so that the employee may determine whether he or she will contest the finding.
3. The Employer agrees to refer individuals to DHS only when the employee chooses to contest a tentative nonconfirmation received from DHS automated verification process or when the Employer issues a tentative nonconfirmation based upon a photo non-match. The Employer will determine whether the employee contests the tentative nonconfirmation as soon as possible



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after the Employer receives it.

4. If the employee contests a tentative nonconfirmation issued by DHS, the Employer will provide the employee with a referral letter and instruct the employee to contact DHS through its toll-free hotline (as found on the referral letter) within 8 Federal Government work days.

5. If the employee contests a tentative nonconfirmation based upon a photo non-match, the Employer will provide the employee with a referral letter to DHS. DHS will electronically transmit the result of the referral to the Employer within 10 Federal Government work days of the referral unless it determines that more than 10 days is necessary. The Employer agrees to check the E-Verify system regularly for case updates.

6. The Employer agrees that if an employee contests a tentative nonconfirmation based upon a photo non-match, the Employer will send a copy of the employee's Form I-551 or Form I-766 to DHS for review by:

- Scanning and uploading the document, or
- Sending a photocopy of the document by an express mail account (furnished and paid for by DHS).

7. The Employer understands that if it cannot determine whether there is a photo match/non-match, the Employer is required to forward the employee's documentation to DHS by scanning and uploading, or by sending the document as described in the preceding paragraph, and resolving the case as specified by the Immigration Services Verifier at DHS who will determine the photo match or non-match.

ARTICLE IV

SERVICE PROVISIONS

SSA and DHS will not charge the Employer for verification services performed under this MOU. The Employer is responsible for providing equipment needed to make inquiries. To access the E-Verify System, an Employer will need a personal computer with Internet access.

ARTICLE V

PARTIES

A. This MOU is effective upon the signature of all parties, and shall continue in effect for as long as the SSA and DHS conduct the E-Verify program unless modified in writing by the mutual consent of all parties, or terminated by any party upon 30 days prior written notice to the others. Any and all system enhancements to the E-Verify program by DHS or SSA, including but not limited to the E-Verify checking against additional data sources and instituting new verification procedures, will be covered under this MOU and will not cause the need for a supplemental MOU that outlines these changes. DHS agrees to train employers on all changes made to E-Verify through the use of mandatory refresher tutorials and updates to the E-Verify User Manual. Even without changes to E-Verify, DHS reserves the right to require employers to take

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mandatory refresher tutorials. An Employer that is a Federal contractor may terminate this MOU when the Federal contract that requires its participation in E-Verify is terminated or completed. In such a circumstance, the Federal contractor must provide written notice to DHS. If an Employer that is a Federal contractor fails to provide such notice, that Employer will remain a participant in the E-Verify program, will remain bound by the terms of this MOU that apply to non-Federal contractor participants, and will be required to use the E-Verify procedures to verify the employment eligibility of all newly hired employees.

B. Notwithstanding Article V, part A of this MOU, DHS may terminate this MOU if deemed necessary because of the requirements of law or policy, or upon a determination by SSA or DHS that there has been a breach of system integrity or security by the Employer, or a failure on the part of the Employer to comply with established procedures or legal requirements. The Employer understands that if it is a Federal contractor, termination of this MOU by any party for any reason may negatively affect its performance of its contractual responsibilities.

C. Some or all SSA and DHS responsibilities under this MOU may be performed by contractor(s), and SSA and DHS may adjust verification responsibilities between each other as they may determine necessary. By separate agreement with DHS, SSA has agreed to perform its responsibilities as described in this MOU.

D. Nothing in this MOU is intended, or should be construed, to create any right or benefit, substantive or procedural, enforceable at law by any third party against the United States, its agencies, officers, or employees, or against the Employer, its agents, officers, or employees.

E. Each party shall be solely responsible for defending any claim or action against it arising out of or related to E-Verify or this MOU, whether civil or criminal, and for any liability wherefrom, including (but not limited to) any dispute between the Employer and any other person or entity regarding the applicability of Section 403(d) of IIRIRA to any action taken or allegedly taken by the Employer.

F. The Employer understands that the fact of its participation in E-Verify is not confidential information and may be disclosed as authorized or required by law and DHS or SSA policy, including but not limited to, Congressional oversight, E-Verify publicity and media inquiries, determinations of compliance with Federal contractual requirements, and responses to inquiries under the Freedom of Information Act (FOIA).

G. The foregoing constitutes the full agreement on this subject between DHS and the Employer.

H. The individuals whose signatures appear below represent that they are authorized to enter into this MOU on behalf of the Employer and DHS respectively.



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To be accepted as a participant in E-Verify, you should only sign the Employer's Section of the signature page. If you have any questions, contact E-Verify at 888-464-4218.

Employer Ozark Applicators, LLC

Penny S Treadway

Name (Please Type or Print)

Title

Electronically Signed

Signature

07/15/2009

Date

Department of Homeland Security – Verification Division

USCIS Verification Division

Name (Please Type or Print)

Title

Electronically Signed

Signature

07/15/2009

Date



E-VERIFY IS A SERVICE OF DHS

Company ID Number: 230496

Information Required for the E-Verify Program

Information relating to your Company:

Company Name: Ozark Applicators, LLC

Company Facility Address: State Highway M

Van Buren, MO 63965

Company Alternate

Address: P.O. Box 398

Van Buren, MO 63965

County or Parish: CARTER

Employer Identification

Number: 431911446

North American Industry
Classification Systems

Code: 238

Parent Company:

Number of Employees: 10 to 19

Number of Sites Verified

for: 1

Are you verifying for more than 1 site? If yes, please provide the number of sites verified for in each State:

- MISSOURI 1 site(s)

Company ID Number: 230496

Information relating to the Program Administrator(s) for your Company on policy questions or operational problems:

Name: **Connie L Dotten**
Telephone Number: **(573) 323 - 6450**
E-mail Address: **tankpainters@yahoo.com**

Fax Number: **(573) 323 - 0055**

Name: **Penny S Treadway**
Telephone Number: **(573) 323 - 6450**
E-mail Address: **tankpainters@yahoo.com**

Fax Number: **(573) 323 - 0055**

474-2018

CERTIFIED COPY OF ORDER

STATE OF MISSOURI

October Session of the October Adjourned

Term. 20 18

County of Boone

} ca.

In the County Commission of said county, on the 25th day of October 20 18

the following, among other proceedings, were had, viz:

Now on this day the County Commission of the County of Boone does hereby approve the request by the Purchasing Department to dispose of the following attached list of surplus PC & Peripheral equipment through MRC Recycling Center.

It is further ordered the Presiding Commissioner is hereby authorized to sign said Request for Disposal forms.

Done this 25th day of October, 2018.

Daniel K. Atwill
Presiding Commissioner

Absent

Fred J. Parry
District I Commissioner

Janet M. Thompson
District II Commissioner

ATTEST:

Taylor W. Burks
Clerk of the County Commission

Boone County Purchasing
David Eagle
Purchasing Assistant



613 E. Ash St.
Columbia, MO 65201
Phone: (573) 886-4394

MEMORANDUM

TO: Boone County Commission
FROM: David Eagle
RE: Computer and Peripheral Surplus Disposal
DATE: October 17, 2018

The Purchasing Departments requests permission to dispose of the following list of surplus PC & Peripheral equipment through MRC Recycling Center. MRC Recycling will pick up our surplus at no charge. They are a State of Missouri, DNR Level Four recycling center. No computer items are land-filled. Purchasing will obtain a Certificate of Destruction, and we will let them know that we want everything recycled, not reused so nothing ends up in the landfill.

Prior to Computer surplus coming to Purchasing for disposal, Information Technology has removed the hard-drives for destruction by their department. Their procedure for PC disposal is:

Once all the data is copied or recovered for the user, IT removes the hard drive and memory from the PC. The memory is held to be used for upgrading other PCs at the county that can benefit. IT sometimes removes parts that can be used as spare if the model is current enough. (ie Power Supplies, Video Cards, etc.) The hard drive is held for a minimum of 30 days in case a user identifies something is missing. After 30 days IT may reuse the hard drive in other county PCs if there are failures. If a hard drive goes unused or fails and IT needs to physically dispose of it, they drill a 5/8" hole through the drive and the data platters. Once IT has collection of "drilled" drives, they deliver them to PC recycling vendor, MRC Recycling Center.

MRC Recycling Center certifies that they have picked up the following items and that all items will be recycled, not reused, so nothing ends up in the landfill.

Signature: _____

Date: _____

	Asset #	Description	Make & Model	Department	Condition of Asset	Serial #
1.	18328	PC WORKSTATION	HP COMPAQ 6300	DESIGN & CONSTRUCTION	UNKNOWN	
2.	18310	PC WORKSTATION	HP COMPAQ 6300	DESIGN & CONSTRUCTION	UNKNOWN	
3.	18320	PC WORKSTATION	HP COMPAQ 6000	STORMWATER	UNKNOWN	

4.	18324	PC WORKSTATION	HP COMPAQ 6300	PLANNING & ZONING	UNKNOWN	
5.	18325	PC WORKSTATION	HP COMPAQ 6300	PLANNING & ZONING	UNKNOWN	
6.	18326	PC WORKSTATION	HP COMPAQ 6300	PLANNING & ZONING	UNKNOWN	
7.	18329	PC WORKSTATION	HP COMPAQ 6300	PUBLIC WORKS	UNKNOWN	
8.	18331	PC WORKSTATION	HP COMPAQ 6300	PUBLIC WORKS	UNKNOWN	
9.	18332	PC WORKSTATION	HP COMPAQ 6300	PUBLIC WORKS	UNKNOWN	
10.	18333	PC WORKSTATION	HP COMPAQ 6300	PUBLIC WORKS	UNKNOWN	
11.	18343	PC WORKSTATION	HP COMPAQ 6300	RECORDER	UNKNOWN	
12.	18353	PC WORKSTATION	HP COMPAQ 6300	PUBLIC WORKS	UNKNOWN	
13.	18354	PC WORKSTATION	HP COMPAQ 6300	PUBLIC WORKS	UNKNOWN	
14.	NO TAGS	MISC. KEYBOARDS	HP COMPAQ 6300	INFORMATION TECHNOLOGY	UNKNOWN	
15.	13751	SWITCH ETHERNET	CISCO CATALYST 2950	SHERIFF	UNKNOWN	
16.	16160	LASER MONOCHROME PRINTER	LEXMARK T430DN	SHERIFF	UNKNOWN	
17.	15077	LASER MONOCHROME PRINTER	LEXMARK T430DN	SHERIFF	UNKNOWN	
18.	14417	SWITCH ETHERNET	CISCO CATALYST 3550	SHERIFF	UNKNOWN	
19.	18783	COLOR PRINTER	HP LASERJET CP 2025	INFORMATION TECHNOLOGY	UNKNOWN	
20.	19456	LCD KVM SWITCH	IO GEAR 8 PORT RACKMOUNT	INFORMATION TECHNOLOGY	UNKNOWN	

21.	18810	NET CLOCK/GPS 9383	SPECTRACOM	INFORMATION TECHNOLOGY	UNKNOWN	
22.	18796	EDGE PORT	CASSIDIAN	INFORMATION TECHNOLOGY	UNKNOWN	
23.	18705	PROLIANT DL380 G7	HP	INFORMATION TECHNOLOGY	UNKNOWN	
24.	18715	WORKSTATION	HP Z2002	INFORMATION TECHNOLOGY	UNKNOWN	
25.	18735	LAPTOP	HP ELITEBOOK	INFORMATION TECHNOLOGY	UNKNOWN	
26.	18776	WORKSTATION	HP Z200	INFORMATION TECHNOLOGY	UNKNOWN	
27.	18777	WORKSTATION	HP Z200	INFORMATION TECHNOLOGY	UNKNOWN	
28.	18778	WORKSTATION	HP Z200	INFORMATION TECHNOLOGY	UNKNOWN	
29.	18779	BLACKBOX NETWORK SERVICE	RS-232 DATA SHARER-3	INFORMATION TECHNOLOGY	UNKNOWN	
30.	18780	ADTRAN DSU III AR		INFORMATION TECHNOLOGY	UNKNOWN	
31.	18788	WORKSTATION	HP Z200	INFORMATION TECHNOLOGY	UNKNOWN	
32.	18791	AUDIO CODES MP-118	VOIP GATEWAY	INFORMATION TECHNOLOGY	UNKNOWN	
33.	18800	FIREWALL ENTERPRISE S1104	MCAFFEE	INFORMATION TECHNOLOGY	UNKNOWN	
34.	18801	AUDIO CODES MP-118	VOIP GATEWAY	PROSECUTING ATTORNEY	UNKNOWN	
35.	18802	AUDIO CODES MP-118	VOIP GATEWAY	PROSECUTING ATTORNEY	UNKNOWN	
36.	18804	LAPTOP	HP ELITEBOOK	INFORMATION TECHNOLOGY	UNKNOWN	
37.	18805	CATALYST 2960 SERIES	CISCO	INFORMATION TECHNOLOGY	UNKNOWN	

38.	18807	AUDIO CODES MP-118	VOIP GATEWAY	INFORMATION TECHNOLOGY	UNKNOWN	
39.	18808	AUDIO CODES MP-118	VOIP GATEWAY	INFORMATION TECHNOLOGY	UNKNOWN	
40.	18809	AUDIO CODES MP-118	VOIP GATEWAY	INFORMATION TECHNOLOGY	UNKNOWN	
41.	18811	PROLIANT DL380 G7	HP	INFORMATION TECHNOLOGY	UNKNOWN	
42.	18812	PROLIANT DL380 G7	HP	INFORMATION TECHNOLOGY	UNKNOWN	
43.	19779	NETWORK SERVICE BUFFERED DATA BROADCAST		INFORMATION TECHNOLOGY	UNKNOWN	
44.	22607	DC 1800	HP COMPAQ	INFORMATION TECHNOLOGU	UNKNOWN	
45.	14902	LASER MONOCHROME PRINTER	LEXMARK T430DN	INFORMATION TECHNOLOGY	UNKNOWN	
46.	NO TAG	MONITOR	ELO	INFORMATION TECHNOLOGY	UNKNOWN	
47.	NO TAG	MONITOR	ELO	INFORMATION TECHNOLOGY	UNKNOWN	
48.	NO TAG	MONITOR	ELO	INFORMATION TECHNOLOGY	UNKNOWN	
49.	NO TAG	MONITOR	ELO	INFORMATION TECHNOLOGY	UNKNOWN	
50.	NO TAG	MONITOR	ELO	INFORMATION TECHNOLOGY	UNKNOWN	
51.	NO TAG	MONITOR	ELO	INFORMATION TECHNOLOGY	UNKNOWN	
52.	NO TAG	LCD 175M MONITOR	NEC MULTISYNE	INFORMATION TECHNOLOGY	UNKNOWN	
70.	NO TAG	TIME VIEW 400	SPECTRACOM	INFORMATION TECHNOLOGY	UNKNOWN	
71.	NO TAG	AUDIO CODES MP-118	VOIP GATEWAY	INFORMATION TECHNOLOGY	UNKNOWN	

72.	NO TAG	BLACK BOX NETWORK SERVICE RS-232	KATA SHARER-2	INFORMATION TECHNOLOGY	UNKNOWN	
73.	NO TAG	IOLAN TS2 RJ45	PERLE	INFORMATION TECHNOLOGY	UNKNOWN	
74.	NO TAG	CYBERIAM CR15i		INFORMATION TECHNOLOGY	UNKNOWN	
75.	NO TAG	CYBERIAM CR15i		INFORMATION TECHNOLOGY	UNKNOWN	
76.	NO TAG	DVM SWITCH	ROSE ELECTRONICS SERVERVIEW PRO-PROFESSIONAL	INFORMATION TECHNOLOGY	UNKNOWN	
77.	NO TAG	MISC. BOX		INFORMATION TECHNOLOGY	UNKNOWN	
78.	NO TAG	LAPTOP BAG		INFORMATION TECHNOLOGY	UNKNOWN	
79.	NO TAG	MISC. SPEAKERS		INFORMATION TECHNOLOGY	UNKNOWN	
80.	NO TAG	MISC. CABLES		INFORMATION TECHNOLOGY	UNKNOWN	
81.	NO TAG	MISC. KEYBOARDS		INFORMATION TECHNOLOGY	UNKNOWN	
82.	NO TAG	6 NP7-12 UPS BATTERIES	YUASA	INFORMATION TECHNOLOGY	UNKNOWN	
83.	13741	LASERJET MONOCHROME PRINTER	HP 5000N	PUBLIC WORKS	UNKNOWN	
84.	14360	PROJECTOR	INFOCUS LP640	COLLECTOR	UNKNOWN	
85.	16075	SERVER NETWORK	HP DL360	INFORMATION TECHNOLOGY	UNKNOWN	
86.	16330	PROJECTOR	INFOCUS IN34EP	INFORMATION TECHNOLOGYT	UNKNOWN	
87.	16868	19" LCD MONITOR	HP L1910	PROSECUTING ATTORNEY	UNKNOWN	
88.	17012	19" LCD MONITOR	HP L1910	PROSECUTING ATTORNEY	UNKNOWN	
89.	17762	SERVER NETWORK	HP DL380	INFORMATION TECHNOLOGY	UNKNOWN	
90.	18797	PHONE SYSTEM SWITCH	PATRIOT 911	911 INFORMATION TECHNOLOGY	UNKNOWN	

91.	18798	PHONE SYSTEM SWITCH	PATRIOT 911	911 INFORMATION TECHNOLOGY	UNKNOWN	
92.	18799	PHONE SYSTEM SWITCH	PATRIOT 911	911 INFORMATION TECHNOLOGY	UNKNOWN	
93.	18806	PHONE SYSTEM SWITCH	PATRIOT 911	911 INFORMATION TECHNOLOGY	UNKNOWN	
94.	17891	SERVER NETWORK	CYBERNETIC CYMISAND8/T8	GIS - COUNTY	UNKNOWN	
95.	18266	SERVER NETWORK	HP PROLIANT DL360	INFORMATION TECHNOLOGY	UNKNOWN	
96.	14819	SERVER NETWORK	HP PROLIANT DL360	INFORMATION TECHNOLOGY	UNKNOWN	
97.	NO TAG	PROJECTOR	INFOCUS	BCJC/EM-IT	UNKNOWN	
98.	16204	LASER COLOR PRINTER	LEXMARK C534DN	COLLECTOR	UNKNOWN	
99.	NO TAGS	MOUNTING HARDWARE BRACKETS		INFORMATION TECHNOLOGY	UNKNOWN	
100.	17116	TOWER PC	COMPAQ DC5800	COURTHOUSE EXPANSION	UNKNOWN	
101.	17963	DESKTOP PC	COMPAQ 6000PRO	CIRCUIT COURT	UNKNOWN	
102.	16958	TOWER PC	COMPAQ DC5800	JUVENILE OFFICE	UNKNOWN	
103.	18128	IPAD	MD366LL/A	JUVENILE OFFICE	UNKNOWN	
104.	18481	IPAD	MD516LL/A	JUVENILE OFFICE	UNKNOWN	
105.	NO TAG	PORTABLE MEDIA PROJECTOR	EX50	CIRCUIT COURT	UNKNOWN	
106.	16985	TOWER PC	COMPAQ DC5800	CIRCUIT CLERK	UNKNOWN	
107.	NO TAG	MISC. NOTEBOOK BATTERIES		CIRCUIT COURT	UNKNOWN	
108.	17840	SCANNER	TWAIN Fi-6130	CIRCUIT CLERK	UNKNOWN	
109.	18169	SCANNER	TWAIN FI-6130Z	CIRCUIT CLERK	UNKNOWN	

110.	18173	SCANNER	TWAIN FI-6130Z	CIRCUIT CLERK	UNKNOWN	
111.	18230	SCANNER	TWAIN FI-6130Z	CIRCUIT CLERK	UNKNOWN	
112.	16429	NETWORK PRINTER	LASER-JET 4250	CIRCUIT COURT	UNKNOWN	
113.	18101	IPAD	MD366LL/A	ADMINISTRATION OF JUSTICE	UNKNOWN	
114.	18486	IPAD	MD366LL/A	CIRCUIT COURT	UNKNOWN	
115.	NO TAGS	BATTERIES – PRINTER	CANON	SHERIFF	UNKNOWN	
116.	11597	LASER MONOCHROME PRINTER	HP LASERJET 5000N	PUBLIC WORKS	UNKNOWN	
117.	12703	LASER MONOCHROME PRINTER	HP 2100M	SHERIFF	UNKNOWN	
118.	18236	PC WORKSTATION	HP COMPAQ 6300	PUBLIC ADMINISTRATOR	UNKNOWN	
119.	18303	PC WORKSTATION	HP COMPAQ 6300	PROSECUTING ATTORNEY	UNKNOWN	
120.	18304	PC WORKSTATION	HP COMPAQ 6300	PROSECUTING ATTORNEY	UNKNOWN	
121.	18305	PC WORKSTATION	HP COMPAQ 6300	PROSECUTING ATTORNEY	UNKNOWN	
122.	18312	PC WORKSTATION	HP COMPAQ 6300	PUBLIC ADMINISTRATOR	UNKNOWN	
123.	18313	PC WORKSTATION	HP COMPAQ 6300	PUBLIC ADMINISTRATOR	UNKNOWN	
124.	18314	PC WORKSTATION	HP COMPAQ 6300	PUBLIC ADMINISTRATOR	UNKNOWN	
125.	18327	PC WORKSTATION	HP COMPAQ 6300	PUBLIC ADMINISTRATOR	UNKNOWN	
126.	18337	PC WORKSTATION	HP COMPAQ 6300	PROSECUTING ATTORNEY	UNKNOWN	
127.	18339	PC WORKSTATION	HP COMPAQ 6300	PROSECUTING ATTORNEY	UNKNOWN	
128.	18340	PC WORKSTATION	HP COMPAQ 6300	PROSECUTING ATTORNEY	UNKNOWN	

129.	18341	PC WORKSTATION	HP COMPAQ 6300	PROSECUTING ATTORNEY	UNKNOWN	
130.	18356	PC WORKSTATION	HP COMPAQ 6300	PROSECUTING ATTORNEY	UNKNOWN	
131.	18357	PC WORKSTATION	HP COMPAQ 6300	PROSECUTING ATTORNEY	UNKNOWN	
132.	18358	PC WORKSTATION	HP COMPAQ 6300	PROSECUTING ATTORNEY	UNKNOWN	
133.	18359	PC WORKSTATION	HP COMPAQ 6300	PROSECUTING ATTORNEY	UNKNOWN	
134.	18566	PC WORKSTATION	HP D8C55UT	PROSECUTING ATTORNEY	UNKNOWN	
135.	18567	PC WORKSTATION	HP D8C55UT	PROSECUTING ATTORNEY	UNKNOWN	
136.	18612	PC WORKSTATION	HP COMPAQ 6300	PROSECUTING ATTORNEY	UNKNOWN	
137.	18570	PC WORKSTATION	HP D8C55UT	PURCHASING	UNKNOWN	
138.	18571	PC WORKSTATION	HP D8C55UT	PURCHASING	UNKNOWN	
139.	18572	PC WORKSTATION	HP D8C55UT	PURCHASING	UNKNOWN	
140.	18708	SWITCH 24-PORT 2960 – CATALYST 2960		JOINT COMMUNICATIONS	UNKNOWN	
141.	18707	SWITCH 24-PORT 2960 – CATALYST 2960		JOINT COMMUNICATIONS	UNKNOWN	
142.	18706	ADVANCED IP SERVICES – 2800	CISCO	JOINT COMMUNICATIONS	UNKNOWN	
143.	18030	NETWORK ROUTER – 2911	CISCO	JOINT COMMUNICATIONS	UNKNOWN	
144.	16623	COLOR LASER PRINTER	KONICA MINOLTA MAGICOLOR 253DL	SHERIFF	UNKNOWN	
145.	12689	TAPE DRIVE	IBM 3570 MAGSTA4R	INFORMATION TECHNOLOGY	UNKNOWN	
146.	13517	TAPE DRIVE	IBM 9348-002	INFORMATION TECHNOLOGY	UNKNOWN	
147.	13625	LASER MONOCHROME PRINTER	LEXMARK T520N	MAIL SERVICES	UNKNOWN	

148.	15125	TAPE DRIVE	CYBERNETIC LTO2	INFORMATION TECHNOLOGY	UNKNOWN	
149.	15377	TERMINAL ETHERNET	CLIET2000K-B3	INFORMATION TECHNOLOGY	UNKNOWN	
150.	15378	TERMINAL ETHERNET	CLIET2000K-B3	INFORMATION TECHNOLOGY	UNKNOWN	
151.	15379	TERMINAL ETHERNET	CLIET2000K-B3	INFORMATION TECHNOLOGY	UNKNOWN	
152.	15380	TERMINAL ETHERNET	CLIET2000K-B3	INFORMATION TECHNOLOGY	UNKNOWN	
153.	15523	LASER MONOCHROME PRINTER	LEXMARK T430DN	SHERIFF	UNKNOWN	
154.	15587	CYBERNETIC CY-LVDG1 I CLIENT		INFORMATION TECHNOLOGY	UNKNOWN	
155.	16135	PC WORKSTATION	HP DC5700	COUNTY CLERK	UNKNOWN	
156.	17479	TAPE DRIVE	CYBERNETIC CYTLL0108	INFORMATION TECHNOLOGY	UNKNOWN	
157.	17830	CYBERNETIC CY-LIBG1/R I CLIENT		INFORMATION TECHNOLOGY	UNKNOWN	
158.	17845	CYMISAND8/T4 MISAN BACKUP APPLICANCE	CYBERNETIC	INFORMATION TECHNOLOGY	UNKNOWN	
159.	18338	PC WORKSTATION	HP COMPAQ 6300	PROSECUTING ATTORNEY	UNKNOWN	
160.	18342	PC WORKSTATION	HP COMPAQ 6300	RECORDER	UNKNOWN	
161.	18344	PC WORKSTATION	HP COMPAQ 6300	RECORDER	UNKNOWN	
162.	18355	PC WORKSTATION	HP COMPAQ 6300	PUBLIC WORKS	UNKNOWN	
163.	18347	PC WORKSTATION	HP COMPAQ 6300	RECORDER	UNKNOWN	
164.	18348	PC WORKSTATION	HP COMPAQ 6300	RECORDER	UNKNOWN	
165.	18349	PC WORKSTATION	HP COMPAQ 6300	RECORDER	UNKNOWN	
166.	18565	PC WORKSTATION	HP D8C55UT	PROSECUTING ATTORNEY	UNKNOWN	

167.	NO TAGS	MONITOR ARMS		INFORMATION TECHNOLOGY	UNKNOWN	
168.	NO TAG	TYPE 7208	IBM	INFORMATION TECHNOLOGYT	UNKNOWN	
169.	NO TAGS	MISC. KEYBOARDS AND SERVER RAILS		INFORMATION TECHNOLOGY	UNKNOWN	
170.	NO TAGS	MISC. KEYBOARDS AND SERVER RAILS		INFORMATION TECHNOLOGY	UNKNOWN	
171.	NO TAGS	MISC. KEYBOARDS AND SERVER RAILS		INFORMATION TECHNOLOGY	UNKNOWN	
172.	NO TAG	MULTITECH SYTEMS MM900C/96		INFORMATION TECHN OLOGY	UNKNOWN	
173.	NO TAG	MULTIMODEM II MT56002BA		INFORMATION TECHNOLOGY	UNKNOWN	
174.	NO TAG	MISC. COMPUTER CABLES		INFORMATION TECHNOLOGY	UNKNOWN	
175.	NO TAG	MISC. COMPUTER CABLES		INFORMATION TECHNOLOGY	UNKNOWN	
176.	NO TAG	MISC. COMPUTER CABLES		INFORMATION TECHNOLOGY	UNKNOWN	
177.	NO TAG	MISC. COMPUTER CABLES		INFORMATION TECHNOLOGY	UNKNOWN	
178.	NO TAG	MISC. COMPUTER CABLES		INFORMATION TECHNOLOGY	UNKNOWN	
179.	NO TAG	PRINTER AND TONER BOX		INFORMATION TECHNOLOGY	UNKNOWN	
180.	15441	20" LCD MONITOR	HP2065	TREASURER	UNKNOWN	
181.	18235	PC WORKSTATION	HP COMPAQ 6300	TREASURER	UNKNOWN	
182.	NO TAG	SWITCH	3COM	SHERIFF	UNKNOWN	
183.	NO TAG	APC UPS		SHERIFF	UNKNOWN	
184.	16165	19" LCD MONITOR	HP L1940T	PURCHASING	UNKNOWN	
185.	15921	LAPTOP NOTEBOOK	PANASONIC TOUGHBOOK 18 TABLET	INFORMATION TECHNOLOGY	UNKNOWN	

186.	NO TAG	MINI MONITOR		SHERIFF	UNKNOWN	
187.	14106	LASER MONOCHROME PRINTER	IBM INFOPRINT 1332	SHERIFF	UNKNOWN	
188.	NO TAG	APC-RBC-UPS BATTERY		SHERIFF	UNKNOWN	

cc: Heather Acton, Auditor Surplus File

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/24/2018

FIXED ASSET TAG NUMBER: 00018328

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES/NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: DESIGN & CONSTRUCTI SIGNATURE: Km

RECEIVED

AUG 01 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 2015-3836 NR

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2741

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

 TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

 TRADE AUCTION SEALED BIDS

 OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/31/2018

FIXED ASSET TAG NUMBER: 00018310

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

RECEIVED

REQUESTED MEANS OF DISPOSAL: _____

AUG 01 2018

OTHER INFORMATION: _____

BOONE COUNTY AUDITOR

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: DESIGN & CONSTRUCTION SIGNATURE: SM

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 2045-3836 NA

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2741

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

 TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

 TRADE AUCTION SEALED BIDS

 OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10.25.18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/27/2018

FIXED ASSET TAG NUMBER: 00018320

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: STORMWATER 1725 SIGNATURE: Km

RECEIVED
AUG 01 2018
BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 1190-3836 NA

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/24/2018

FIXED ASSET TAG NUMBER: 00018324

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: 1710 PLANNING & ZONING SIGNATURE: Km

RECEIVED

AUG 01 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 1190-3836 Na

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

 TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

 TRADE AUCTION SEALED BIDS

 OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10.25.18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/24/2018

FIXED ASSET TAG NUMBER: 00018325

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PLANNING & ZONING SIGNATURE: Km

RECEIVED

AUG 01 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 1190-3836 NA

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

___ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

___ TRADE ___ AUCTION ___ SEALED BIDS

___ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10.25.18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/24/2018

FIXED ASSET TAG NUMBER: 00018326

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: 1710 PLANNING & ZONING SIGNATURE: Km

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 1190-3836 HPL

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

RECEIVED

AUG 01 2018

BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/27/2018 FIXED ASSET TAG NUMBER: 00018329

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PUBLIC WORKS 2040 SIGNATURE: SM

RECEIVED

AUG 01 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 2040-3336 HEL

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2741

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10.25.18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/25/2018 FIXED ASSET TAG NUMBER: 00018331

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PUBLIC WORKS 2040 SIGNATURE: Km

RECEIVED
AUG 01 2018
BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 2040-3836 NA

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2741

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/25/2018

FIXED ASSET TAG NUMBER: 00018332

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PUBLIC WORKS 2040 SIGNATURE: Km

RECEIVED

AUG 01 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 2040-3836 HO

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2741

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10.25.18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/25/2018

FIXED ASSET TAG NUMBER: 00018333

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PUBLIC WORKS 2040 SIGNATURE: Km

RECEIVED

AUG 01 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 2040-3836 NA

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2741

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/23/2018

FIXED ASSET TAG NUMBER: 00018343

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: RECORDER 1160 SIGNATURE: SM

RECEIVED

AUG 01 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 1190-3836 NR

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/25/2018

FIXED ASSET TAG NUMBER: 00018353

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PUBLIC WORKS 2040 SIGNATURE: Km

RECEIVED
AUG 01 2018
BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 2040-3836 HA

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2741

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/25/2018

FIXED ASSET TAG NUMBER: 00018354

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PUBLIC WORKS 2040 SIGNATURE: Km

RECEIVED

AUG 01 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 2040-3836 NA

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2741

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10.25.18

SIGNATURE [Signature]

BOONE COUNTY
Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 07/25/2018

Fixed Asset Tag Number: N/A

Description of Asset: Misc. Keyboards

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

RECEIVED

Other Information (Serial number, etc.):

AUG 01 2018

Condition of Asset: Working

BOONE COUNTY AUDITOR

Reason for Disposition: No Longer Needed

Location of Asset and Desired Date for Removal to Storage: ASAP in GC Room 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature SM

To be Completed by: AUDITOR No Data

Original Acquisition Date _____

G/L Account for Proceeds 1190-3836 HA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 08/03/2018

FIXED ASSET TAG NUMBER: 00013751

DESCRIPTION: CISCO CATALYST 2950
SWITCH ETHERNET

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: PURCHASED 11/26/02

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: SHERIFF SIGNATURE: Km

RECEIVED

AUG 07 2018

BOONE COUNTY AUDITOR

AUDITOR

No Data

ORIGINAL ACQUISITION DATE 0/00/00

G/L ACCOUNT FOR PROCEEDS 1190-3836 NA

ORIGINAL ACQUISITION AMOUNT .00

ORIGINAL FUNDING SOURCE _____

ACCOUNT GROUP _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 08/03/2018

FIXED ASSET TAG NUMBER: 00016160

DESCRIPTION: LEXMARK T430DN
PRINTER LASER MONOCHROME

REQUESTED MEANS OF DISPOSAL: _____

RECEIVED

OTHER INFORMATION: _____

AUG 07 2018

CONDITION OF ASSET: PURCHASED 03/21/07

BOONE COUNTY AUDITOR

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: SHERIFF SIGNATURE: Km

AUDITOR

ORIGINAL ACQUISITION DATE 2005/07/14

G/L ACCOUNT FOR PROCEEDS 1190-3836 HQ

ORIGINAL ACQUISITION AMOUNT 957.77

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 08/03/2018

FIXED ASSET TAG NUMBER: 00015077

DESCRIPTION: LEXMARK T430DN
PRINTER LASER MONOCHROME

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: PURCHASED 06/16/05

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: SHERIFF 1251 SIGNATURE: KM

RECEIVED

AUG 07 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2005/06/28

G/L ACCOUNT FOR PROCEEDS 1190-3836 HCL

ORIGINAL ACQUISITION AMOUNT 957.77

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

___ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

___ TRADE ___ AUCTION ___ SEALED BIDS

___ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 08/03/2018

FIXED ASSET TAG NUMBER: 00014417

DESCRIPTION: CISCO CATALYST 3550
SWITCH ETHERNET

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: PURCHASED 04/29/2004

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: SHERIFF 1251 SIGNATURE: Km

RECEIVED

AUG 07 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2004/05/18

G/L ACCOUNT FOR PROCEEDS 2905-3836 HQ

ORIGINAL ACQUISITION AMOUNT 3,257.00

ORIGINAL FUNDING SOURCE 2787

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

 TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

 TRADE AUCTION SEALED BIDS

 OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10.25.18

SIGNATURE [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 08/17/18

Fixed Asset Tag Number: 18783

RECEIVED

AUG 16 2018

Description of Asset: HP Color Laserjet CP 2025

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Purchased 11/01/13

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature Km

To be Completed by: AUDITOR

Original Acquisition Date 11-1-13

G/L Account for Proceeds 2700-3836 HA

Original Acquisition Amount \$822.29

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature _____

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 08/17/2018

FIXED ASSET TAG NUMBER: 00019456

DESCRIPTION: IO GEAR 8 PORT LCD KVM SWITCH
RACKMOUNT CONSOLE KVM

RECEIVED

REQUESTED MEANS OF DISPOSAL: _____

AUG 16 2018

OTHER INFORMATION: _____

BOONE COUNTY AUDITOR

CONDITION OF ASSET: PURCHASED 01/12/2015

REASON FOR DISPOSITION: NO LONGER NEEDED

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: Pickup ECC-Beth Boos-IT

WAS ASSET PURCHASED WITH GRANT FUNDING? YES
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: 1170 INFORMATION TECHNOL SIGNATURE: Km

AUDITOR

ORIGINAL ACQUISITION DATE 2015/02/06

G/L ACCOUNT FOR PROCEEDS N/A HR

ORIGINAL ACQUISITION AMOUNT 1,144.34

ORIGINAL FUNDING SOURCE 2790

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10.25.18

SIGNATURE [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 08/17/18

Fixed Asset Tag Number: 18810

RECEIVED

Description of Asset: Spectracom Net Clock/GPS 9383

AUG 16 2018

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Purchased 11/01/13

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature ICM

To be Completed by: AUDITOR

Original Acquisition Date 11-1-13

G/L Account for Proceeds 2700-3835 HA

Original Acquisition Amount \$6,120.25

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 474-2018

Date Approved 10.25.18

Signature [Handwritten Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

RECEIVED

AUG 16 2018

BOONE COUNTY AUDITOR

Date: 08/17/18

Fixed Asset Tag Number: 18796

Description of Asset: Cassidian Edge Port

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Purchased 11/01/13

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature Km

To be Completed by: AUDITOR

Original Acquisition Date 11-1-13 G/L Account for Proceeds 2700-3835 40

Original Acquisition Amount \$5,871.90

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Handwritten Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 08/17/18

Fixed Asset Tag Number: 18705

RECEIVED

Description of Asset: HP Proliant DL380 G7

AUG 16 2018

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Purchased 11/01/13

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature Km

To be Completed by: AUDITOR

Original Acquisition Date 11-1-13

G/L Account for Proceeds 2700-3835 NA

Original Acquisition Amount \$6,380.76

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Handwritten Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 08/17/18

Fixed Asset Tag Number: 18715

RECEIVED

AUG 16 2018

Description of Asset: HP Z200 Workstation

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Purchased 11/01/13

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature Km

To be Completed by: AUDITOR

Original Acquisition Date 11-1-13

G/L Account for Proceeds 2700-3836 HA

Original Acquisition Amount \$4,165.52

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Handwritten Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 08/17/18

Fixed Asset Tag Number: 18735

RECEIVED

AUG 16 2018

Description of Asset: HP Elitebook Laptop

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Purchased 11/01/13

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name:

1170-IT

Signature

KM

To be Completed by: AUDITOR

Original Acquisition Date 11-1-13

G/L Account for Proceeds 2700-3836 HA

Original Acquisition Amount \$2,572.82

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

RECEIVED

Date: 08/17/18

Fixed Asset Tag Number: 18776

AUG 16 2018

Description of Asset: HP Z200 Workstation

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Purchased 11/01/13

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name:

1170-IT

Signature



To be Completed by: AUDITOR

Original Acquisition Date 11-1-13

G/L Account for Proceeds 2700-3836 HA

Original Acquisition Amount \$4,165.52

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

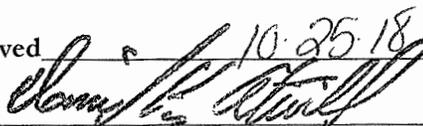
Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature 

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

RECEIVED

Date: 08/17/18

Fixed Asset Tag Number: 18777

AUG 16 2018

Description of Asset: HP Z200 Workstation

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Purchased 11/01/13

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature Km

To be Completed by: AUDITOR

Original Acquisition Date 11-1-13

G/L Account for Proceeds 2700-3836 NA

Original Acquisition Amount \$4,165.52

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 474-2018

Date Approved 10.25.18

Signature _____

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 08/17/18

Fixed Asset Tag Number: 18778

RECEIVED

AUG 16 2018

Description of Asset: HP Z200 Workstation

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Purchased 11/01/13

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature Km

To be Completed by: AUDITOR

Original Acquisition Date 11-1-13

G/L Account for Proceeds 2700-3836 HQ

Original Acquisition Amount \$4,165.52

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Handwritten Signature]

BOONE COUNTY
Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

RECEIVED

Date: 08/17/18

Fixed Asset Tag Number: 18779

AUG 16 2018

Description of Asset: Black Box Network Service RS-232 Data Sharer-3

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Purchased 11/01/13

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature Km

To be Completed by: AUDITOR

Original Acquisition Date 11-1-13

G/L Account for Proceeds 2700-3836 HA

Original Acquisition Amount \$1071.07

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

RECEIVED

Date: 08/17/18

Fixed Asset Tag Number: 18780

AUG 16 2018

Description of Asset: AdTran DSU III AR

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Purchased 11/01/13

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature Km

To be Completed by: AUDITOR

Original Acquisition Date 11-1-13

G/L Account for Proceeds 2700-3836 NA

Original Acquisition Amount \$693.15

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 474-2018

Date Approved 10.25.18

Signature _____

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 08/17/18

Fixed Asset Tag Number: 18788

Description of Asset: HP Z200 Workstation

RECEIVED

AUG 16 2018

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Purchased 11/01/13

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature: KM

To be Completed by: AUDITOR

Original Acquisition Date: 11-1-13

G/L Account for Proceeds: 2700-3836 NA

Original Acquisition Amount: \$4,165.52

Original Funding Source: 2772

Account Group: 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number: 474-2018

Date Approved: 10-25-18

Signature: [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 08/17/18

Fixed Asset Tag Number: 18791

Description of Asset: Audio Codes MP - 118 Voip Gateway

RECEIVED

AUG 16 2018

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Purchased 11/01/13

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature Km

To be Completed by: AUDITOR

Original Acquisition Date 11-1-13

G/L Account for Proceeds 2100-3836 NA

Original Acquisition Amount \$1,455.83

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

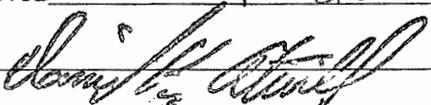
Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 474-2018

Date Approved 10.25.18

Signature 

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

RECEIVED

Date: 08/17/18

Fixed Asset Tag Number: 18800

AUG 16 2018

Description of Asset: McAfee Firewall Enterprise S1104

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Purchased 11/01/13

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature Km

To be Completed by: AUDITOR

Original Acquisition Date 11-1-13

G/L Account for Proceeds 2700-3836 HQ

Original Acquisition Amount \$2,552.95

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

___ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

___ Trade ___ Auction ___ Sealed Bids

___ Other Explain _____

Commission Order Number 474-2018

Date Approved 10.25.18

Signature *[Signature]*

BOONE COUNTY
Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

RECEIVED

AUG 16 2018

BOONE COUNTY AUDITOR

Date: 08/17/18

Fixed Asset Tag Number: 18801

Description of Asset: Audio Codes MP - 118 Voip Gateway

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Purchased 11/01/13

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170 - IT

Signature KM

To be Completed by: AUDITOR

Original Acquisition Date 11-1-13

G/L Account for Proceeds 2700-383640

Original Acquisition Amount \$1,455.83

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 08/17/18

Fixed Asset Tag Number: 18802

Description of Asset: Audio Codes MP - 118 Voip Gateway

RECEIVED

AUG 16 2018

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Purchased 11/01/13

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature Km

To be Completed by: AUDITOR

Original Acquisition Date 11-1-13

G/L Account for Proceeds 2700-3836 NA

Original Acquisition Amount \$1,455.83

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

___ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

___ Trade ___ Auction ___ Sealed Bids

___ Other Explain _____

Commission Order Number 474-2018

Date Approved 10.25.18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 08/17/18

Fixed Asset Tag Number: 18804

RECEIVED

AUG 16 2018

Description of Asset: HP Elitebook Laptop

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Purchased 11/01/13

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name:

1170-IT

Signature

ICM

To be Completed by: AUDITOR

Original Acquisition Date

11-1-13

G/L Account for Proceeds

2700-3836 NA

Original Acquisition Amount

\$ 2572.82

Original Funding Source

2772

Account Group

1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer

Department Name

Number

Location within Department

Individual

____ Trade

____ Auction

____ Sealed Bids

____ Other

Explain

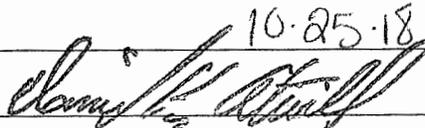
Commission Order Number

474-2018

Date Approved

10.25.18

Signature



BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

RECEIVED

Date: 08/17/18

Fixed Asset Tag Number: 18805

AUG 16 2018

Description of Asset: Cisco Catalyst 2960 Series (boxed)

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Purchased 11/01/13

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature Km

To be Completed by: AUDITOR

Original Acquisition Date 11-1-13

G/L Account for Proceeds 2700-3836 NA

Original Acquisition Amount \$1,966.87

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

RECEIVED

Date: 08/17/18

Fixed Asset Tag Number: 18807

AUG 16 2018

Description of Asset: Audio Codes MP - 118 Voip Gateway

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Purchased 11/01/13

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170 - IT

Signature KM

To be Completed by: AUDITOR

Original Acquisition Date 11-1-13

G/L Account for Proceeds 2700-3836 410

Original Acquisition Amount \$1,455.83

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

RECEIVED

Date: 08/17/18

Fixed Asset Tag Number: 18808

AUG 16 2018

Description of Asset: Audio Codes MP - 118 Voip Gateway

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Purchased 11/01/13

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170 IT

Signature km

To be Completed by: AUDITOR

Original Acquisition Date 11-1-13

G/L Account for Proceeds 2700-3836 HQ

Original Acquisition Amount \$1,455.83

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

RECEIVED

Date: 08/17/18

Fixed Asset Tag Number: 18809

AUG 16 2018

Description of Asset: Audio Codes MP - 118 Voip Gateway

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Purchased 11/01/13

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature km

To be Completed by: AUDITOR

Original Acquisition Date 11-1-13

G/L Account for Proceeds 2700-3836 HA

Original Acquisition Amount \$1,455.83

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

___ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

___ Trade ___ Auction ___ Sealed Bids

___ Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature *[Signature]*

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 08/17/18

Fixed Asset Tag Number: 18811

Description of Asset: HP Proliant DL380 G7

RECEIVED

AUG 16 2018

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

BOONE COUNTY AUDITOR

Other Information (Serial number, etc.):

Condition of Asset: Purchased 11/01/13

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature Km

To be Completed by: AUDITOR

Original Acquisition Date 11-1-13

G/L Account for Proceeds 2700-3836 HQ

Original Acquisition Amount \$4,933.74

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 474-2018

Date Approved 10.25.18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 08/17/18

Fixed Asset Tag Number: 18812

RECEIVED

Description of Asset: HP Proliant DL380 G7

AUG 16 2018

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain: **BOONE COUNTY AUDITOR**

Other Information (Serial number, etc.):

Condition of Asset: Purchased 11/01/13

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature KM

To be Completed by: AUDITOR

Original Acquisition Date 11-1-13

G/L Account for Proceeds 2700-3836 HA

Original Acquisition Amount \$4,451.40

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 08/17/18

Fixed Asset Tag Number: 22607

Description of Asset: HP Compaq DC 1800

RECEIVED

AUG 16 2018

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Unknown

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170 - IT

Signature Km

To be Completed by: AUDITOR No Data

Original Acquisition Date _____

G/L Account for Proceeds 1190-3836 NA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10.25.18

Signature [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 08/17/2018

FIXED ASSET TAG NUMBER: 00014902

DESCRIPTION: LEXMARK T430DN
PRINTER LASER MONOCHROME

RECEIVED

REQUESTED MEANS OF DISPOSAL: _____

AUG 16 2018

OTHER INFORMATION: _____

BOONE COUNTY AUDITOR

CONDITION OF ASSET: PURCHASED 4/12/2005

REASON FOR DISPOSITION: NO LONGER NEEDED

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: Pickup ECC-Beth Boos-IT

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: 2702 EMERGENCY MGMT OPE SIGNATURE: Km

AUDITOR

ORIGINAL ACQUISITION DATE 2005/05/25

G/L ACCOUNT FOR PROCEEDS 1190-3836 NA

ORIGINAL ACQUISITION AMOUNT 957.77

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

___ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

___ TRADE ___ AUCTION ___ SEALED BIDS

___ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 08/17/18

Fixed Asset Tag Number: N/A

RECEIVED

AUG 16 2018

Description of Asset: elo Monitor

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): G10C009139

Condition of Asset: Unknown

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name:

1170-IT

Signature

Km

To be Completed by: AUDITOR

Original Acquisition Date NO Data

G/L Account for Proceeds: 1190-3836 HQ

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

_____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

_____ Trade _____ Auction _____ Sealed Bids

_____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY
Request for Disposal/Transfer of County Property
Complete, sign, and return to Auditor's Office

Date: 08/17/18

Fixed Asset Tag Number: N/A

RECEIVED

Description of Asset: elo Monitor

AUG 16 2018

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): H11C005097

Condition of Asset: Unknown

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature Km

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 NA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10.25.18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

RECEIVED

Date: 08/17/18

Fixed Asset Tag Number: N/A

AUG 16 2018

Description of Asset: elo Monitor

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): H11C004952

Condition of Asset: Unknown

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature LCM

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 AQ

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 08/17/18

Fixed Asset Tag Number: N/A

RECEIVED

Description of Asset: elo Monitor

AUG 16 2018

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): I11C020351

Condition of Asset: Unknown

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name:

1170-IT

Signature

km

To be Completed by: AUDITOR

No Data

Original Acquisition Date

G/L Account for Proceeds

1190-3836 HA

Original Acquisition Amount

Original Funding Source

Account Group

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer

Department Name

Number

Location within Department

Individual

____ Trade

____ Auction

____ Sealed Bids

____ Other

Explain

Commission Order Number

474-2018

Date Approved

10.25.18

Signature

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 08/17/18

Fixed Asset Tag Number: N/A

RECEIVED

AUG 16 2018

Description of Asset: elo Monitor - in a box

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): C15010586

Condition of Asset: Unknown

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature Km

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 HA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10.25.18

Signature [Handwritten Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 08/17/18

Fixed Asset Tag Number: N/A

RECEIVED

AUG 16 2018

Description of Asset: elo Monitor - in a box

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): I11C020339

Condition of Asset: Unknown

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature: Km

To be Completed by: AUDITOR

Original Acquisition Date: No Date

G/L Account for Proceeds: 1190-3836 HA

Original Acquisition Amount: _____

Original Funding Source: _____

Account Group: _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number: 474-2018

Date Approved: 10.25.18

Signature: _____

BOONE COUNTY
Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 08/17/18

Fixed Asset Tag Number: N/A

RECEIVED

AUG 16 2018

Description of Asset: NEC Multisync LCD 175M Monitor

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): 17146043NA

Condition of Asset: Unknown

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature LCM

To be Completed by: AUDITOR

Original Acquisition Date No Date

G/L Account for Proceeds 1190-3836 HR

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY
Request for Disposal/Transfer of County Property
Complete, sign, and return to Auditor's Office

Date: 08/17/18

Fixed Asset Tag Number: N/A

RECEIVED

Description of Asset: Spectracom Time View 400

AUG 16 2018

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): 3918

Condition of Asset: Unknown

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature: km

To be Completed by: AUDITOR

Original Acquisition Date No Date

G/L Account for Proceeds 1190-3836 HA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 08/17/18

Fixed Asset Tag Number: N/A

RECEIVED

AUG 16 2018

Description of Asset: Audio Codes MP - 118 Voip Gateway

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): DT14722782

Condition of Asset: Unknown

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature *LM*

To be Completed by: AUDITOR *No Data*

Original Acquisition Date _____

G/L Account for Proceeds *1190-3836 Ha*

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number *474-2018*

Date Approved *10-25-18*

Signature *[Signature]*

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 08/17/18

Fixed Asset Tag Number: N/A

RECEIVED

Description of Asset: Black Box Network Service RS-232 Data Sharer-2

AUG 16 2018

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

BOONE COUNTY AUDITOR

Other Information (Serial number, etc.): 11245325906

Condition of Asset: Unknown

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature Km

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 ~~NO~~

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

_____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

_____ Trade _____ Auction _____ Sealed Bids

_____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 08/17/18

Fixed Asset Tag Number: N/A

Description of Asset: Perle IOLAN TS2 RJ45

RECEIVED

AUG 16 2018

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

BOONE COUNTY AUDITOR

Other Information (Serial number, etc.): 80-243814M10045

Condition of Asset: Unknown

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature Km

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 XKA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10.25.18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 08/17/18

Fixed Asset Tag Number: N/A

RECEIVED

AUG 16 2018

Description of Asset: Cyberoam CR15i (boxed)

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): C026002984

Condition of Asset: Unknown

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name:

1170 IT

Signature

Km

To be Completed by: AUDITOR

Original Acquisition Date

No Data

G/L Account for Proceeds

1190-3836 NA

Original Acquisition Amount

Original Funding Source

Account Group

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer

Department Name

Number

Location within Department

Individual

____ Trade

____ Auction

____ Sealed Bids

____ Other

Explain

Commission Order Number

474-2018

Date Approved

10.25.18

Signature

BOONE COUNTY
Request for Disposal/Transfer of County Property
Complete, sign, and return to Auditor's Office

Date: 08/17/18

Fixed Asset Tag Number: N/A

RECEIVED

Description of Asset: Cyberoam CR15i (boxed)

AUG 16 2018

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

BOONE COUNTY AUDITOR

Other Information (Serial number, etc.): C026002985

Condition of Asset: Unknown

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature Km

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 AA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

_____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

_____ Trade _____ Auction _____ Sealed Bids

_____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10:25:18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 08/17/18

Fixed Asset Tag Number: N/A

Description of Asset: Rose Electronics Serverview Pro-Professional KVM Switch

RECEIVED

AUG 16 2018

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

BOONE COUNTY AUDITOR

Other Information (Serial number, etc.): 1007372

Condition of Asset: Unknown

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170 - IT

Signature Km

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 HA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10.25.18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

RECEIVED
AUG 16 2018

Date: 08/17/18

Fixed Asset Tag Number: N/A

Description of Asset: Misc: Box of CSB batteries; Lightning supressor; (5) Genovation P/S-2 keypads; HP Serial Keyboard; Variety of cables

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Unknown

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC - See Beth Boos - IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name:

1170-IT

Signature

Km

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 NA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 8/21/18

Fixed Asset Tag Number: N/A

Description of Asset: Laptop Bag

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Unknown

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: ASAP in GC Room 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name:

1170 - IT

Signature _____

To be Completed by: AUDITOR

Original Acquisition Date NO Data

G/L Account for Proceeds 1190-3836 AR

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

_____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

_____ Trade _____ Auction _____ Sealed Bids

_____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10.25.18

Signature [Signature]

RECEIVED
SEP 10 2018
BOONE COUNTY AUDITOR

BOONE COUNTY
Request for Disposal/Transfer of County Property
Complete, sign, and return to Auditor's Office

Date: 8/21/18

Fixed Asset Tag Number: N/A

Description of Asset: Misc. Speakers

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Unknown

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: ASAP in GC Room 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature _____

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 KA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

_____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

_____ Trade _____ Auction _____ Sealed Bids

_____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10.25.18

Signature 

RECEIVED

SEP 10 2018

BOONE COUNTY AUDITOR

BOONE COUNTY
Request for Disposal/Transfer of County Property
Complete, sign, and return to Auditor's Office

Date: 8/21/18

Fixed Asset Tag Number: N/A

Description of Asset: Misc. Cables

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Unknown

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: ASAP in GC Room 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature _____

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 AR

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

_____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

_____ Trade _____ Auction _____ Sealed Bids

_____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10.25.18

Signature *[Handwritten Signature]*

RECEIVED
SEP 10 2018
BOONE COUNTY AUDITOR

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 8/21/18

Fixed Asset Tag Number: N/A

Description of Asset: Misc. Keyboards

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Unknown

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: ASAP in GC Room 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature _____

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Signature]

RECEIVED
SEP 10 2018
BOONE COUNTY AUDITOR

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 8/30/18

Fixed Asset Tag Number: N/A

Description of Asset: 6 Yuasa NP7-12FR UPS Batteries

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Not known

Reason for Disposition: No Longer Needed

Location of Asset and Desired Date for Removal to Storage: Pickup at ECC-See Mark Hahn-IT

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name:

1170-IT

Signature _____

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836NA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

_____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

_____ Trade _____ Auction _____ Sealed Bids

_____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10.25.18

Signature [Signature]

RECEIVED

SEP 10 2018

BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 08/23/2018

FIXED ASSET TAG NUMBER: 00013741

DESCRIPTION: HP LASERJET 5000N
PRINTER LASER MONOCHROME

RECEIVED

REQUESTED MEANS OF DISPOSAL: _____

SEP 10 2018

OTHER INFORMATION: _____

BOONE COUNTY AUDITOR

CONDITION OF ASSET: PURCHASED 10/19/2000

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PUBLIC WORKS SIGNATURE: Km

AUDITOR

ORIGINAL ACQUISITION DATE 2000/10/19

G/L ACCOUNT FOR PROCEEDS 2040-3836 He

ORIGINAL ACQUISITION AMOUNT 2,143.12

ORIGINAL FUNDING SOURCE 2741

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

 TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

 TRADE AUCTION SEALED BIDS

 OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 09/04/2018

FIXED ASSET TAG NUMBER: 00014360

DESCRIPTION: INFOCUS LP640
PROJECTOR

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: PURCHASED 02/17/2004

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: COLLECTOR SIGNATURE: Km

RECEIVED

SEP 10 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2004/04/27

G/L ACCOUNT FOR PROCEEDS 2110-38364a

ORIGINAL ACQUISITION AMOUNT 2,140.61

ORIGINAL FUNDING SOURCE 2788

ACCOUNT GROUP 1604

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 09/07/2018

FIXED ASSET TAG NUMBER: 00016075

DESCRIPTION: HP DL360
SERVER NETWORK

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: NO LONGER NEEDED

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: INFORMATION TECHNOL SIGNATURE: Km

AUDITOR

ORIGINAL ACQUISITION DATE 2007/03/21

G/L ACCOUNT FOR PROCEEDS 1190-3836 NA

ORIGINAL ACQUISITION AMOUNT 4,841.00

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

RECEIVED

SEP 10 2018

BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 09/04/2018

FIXED ASSET TAG NUMBER: 00016330

DESCRIPTION: INFOCUS IN34EP
PROJECTOR

RECEIVED

REQUESTED MEANS OF DISPOSAL: _____

SEP 10 2018

OTHER INFORMATION: _____

CONDITION OF ASSET: PURCHASED 10/02/2007

BOONE COUNTY AUDITOR

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES/NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: INFORMATION TECHNOL SIGNATURE: Km

AUDITOR

ORIGINAL ACQUISITION DATE 2007/11/07

G/L ACCOUNT FOR PROCEEDS 1190-38364R

ORIGINAL ACQUISITION AMOUNT 822.16

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10.25.18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 09/04/2018

FIXED ASSET TAG NUMBER: 00016868

DESCRIPTION: HP L1910
MONITOR LCD 19 INCH

REQUESTED MEANS OF DISPOSAL: _____

RECEIVED

OTHER INFORMATION: _____

SEP 10 2018

CONDITION OF ASSET: NOT WORKING

REASON FOR DISPOSITION: REPLACEMENT

BOONE COUNTY AUDITOR

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PROSECUTING ATTORNI SIGNATURE: Km

AUDITOR

ORIGINAL ACQUISITION DATE 2009/05/05

G/L ACCOUNT FOR PROCEEDS 1190-3836 NR

ORIGINAL ACQUISITION AMOUNT 134.78

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 09/04/2018

FIXED ASSET TAG NUMBER: 00017012

DESCRIPTION: HP L1910
MONITOR LCD 19 INCH

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: NOT WORKING

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PROSECUTING ATTORNI SIGNATURE: Km

RECEIVED

SEP 10 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2009/11/25

G/L ACCOUNT FOR PROCEEDS 1190-3836 HQ

ORIGINAL ACQUISITION AMOUNT 134.78

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

 TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

 TRADE AUCTION SEALED BIDS

 OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 09/07/2018

FIXED ASSET TAG NUMBER: 00017762

DESCRIPTION: HP DL380
SERVER NETWORK

REQUESTED MEANS OF DISPOSAL: _____

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OTHER INFORMATION: _____

SEP 10 2018

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

BOONE COUNTY AUDITOR

REASON FOR DISPOSITION: NO LONGER NEEDED

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: INFORMATION TECHNOL SIGNATURE: Km

AUDITOR

ORIGINAL ACQUISITION DATE 2011/09/02

G/L ACCOUNT FOR PROCEEDS 1190-3836 NA

ORIGINAL ACQUISITION AMOUNT 4,600.99

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

 TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

 TRADE AUCTION SEALED BIDS

 OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 8/31/18

Fixed Asset Tag Number: 18797

Description of Asset: Patriot 911 Phone System Switch

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Working

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: ASAP in GC Room 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 2703- 911 IT

Signature _____

To be Completed by: AUDITOR

Original Acquisition Date 11-1-13

G/L Account for Proceeds 2701-3836 HA

Original Acquisition Amount \$1,966.87

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature 

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SEP 10 2018

BOONE COUNTY AUDITOR

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 8/31/18

Fixed Asset Tag Number: 18798

Description of Asset: Patriot 911 Phone System Switch

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Working

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: ASAP in GC Room 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 2703-911 IT

Signature _____

To be Completed by: AUDITOR

Original Acquisition Date 11-1-13

G/L Account for Proceeds 2701-3836 NA

Original Acquisition Amount \$1,966.87

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 474-2018

Date Approved 10.25.18

Signature [Signature]

RECEIVED
SEP 10 2018
BOONE COUNTY AUDITOR

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 8/31/18

Fixed Asset Tag Number: 18799

Description of Asset: Patriot 911 Phone System Switch

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Working

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: ASAP in GC Room 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 2703-911IT

Signature _____

To be Completed by: AUDITOR

Original Acquisition Date 11-1-13

G/L Account for Proceeds 2701-3836 HQ

Original Acquisition Amount \$1,966.87

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature 

RECEIVED

SEP 10 2018

BOONE COUNTY AUDITOR

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 8/31/18

Fixed Asset Tag Number: 18806

Description of Asset: Patriot 911 Phone System Switch

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Working

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: ASAP in GC Room 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 2703-911 IT

Signature _____

To be Completed by: AUDITOR

Original Acquisition Date 11-1-13

G/L Account for Proceeds 2701-3836 NA

Original Acquisition Amount \$1,966.87

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10.25.18

Signature [Signature]

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SEP 10 2018

BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 09/07/2018 FIXED ASSET TAG NUMBER: 00017891

DESCRIPTION: CYBERNETIC CYMISAND8/T8
SERVER NETWORK

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: NO LONGER NEEDED

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: GIS - COUNTY SIGNATURE: Km

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SEP 10 2018
BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2012/03/02 G/L ACCOUNT FOR PROCEEDS 2010-3835 Ha

ORIGINAL ACQUISITION AMOUNT 9,334.00

ORIGINAL FUNDING SOURCE 2743

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

___ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

___ TRADE ___ AUCTION ___ SEALED BIDS

___ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10.25.18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 09/07/2018

FIXED ASSET TAG NUMBER: 00018266

DESCRIPTION: HP PROLIANT DL360
SERVER NETWORK

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: NO LONGER NEEDED

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: INFORMATION TECHNOL ¹¹⁷⁰ SIGNATURE: Km

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SEP 10 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/07/12

G/L ACCOUNT FOR PROCEEDS 1190-3836-11a

ORIGINAL ACQUISITION AMOUNT 6,945.72

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 09/07/2018

FIXED ASSET TAG NUMBER: 00014819

DESCRIPTION: HP PROLIANT DL360
SERVER NETWORK

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: NO LONGER NEEDED

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: INFORMATION TECHNOL SIGNATURE: Km

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SEP 10 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2005/03/16

G/L ACCOUNT FOR PROCEEDS 1190-3835HQ

ORIGINAL ACQUISITION AMOUNT 5,645.80

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

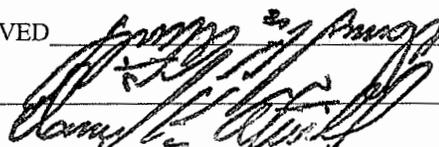
INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE 

BOONE COUNTY
Request for Disposal/Transfer of County Property
Complete, sign, and return to Auditor's Office

Date: 9/4/18

Fixed Asset Tag Number: No Tag

Description of Asset: InFocus Projector - Part #IN2116

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BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): Serial #BEJB02600179

Condition of Asset: Not Working

Reason for Disposition: Not Working

Location of Asset and Desired Date for Removal to Storage: ASAP - In GC Room 123.

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 2703-IT BCJC/EM

Signature



To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 HA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

_____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

_____ Trade _____ Auction _____ Sealed Bids

_____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10.25.18

Signature 

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 02/21/2018

FIXED ASSET TAG NUMBER: 00016204

DESCRIPTION: LEXMARK C534DN
PRINTER LASER COLOR

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: PURCHASED 2007 - POOR

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP - In GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: COLLECTOR SIGNATURE: *Judy*

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FEB 21 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2007/06/19

G/L ACCOUNT FOR PROCEEDS 2110-3336 HQ

ORIGINAL ACQUISITION AMOUNT 1,132.76

ORIGINAL FUNDING SOURCE 2788

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE ____ AUCTION ____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE *Dennis H. Atwell*

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 5/31/18

Fixed Asset Tag Number: No Tags

Description of Asset: Mounting Hardware Brackets (8)

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset:

Reason for Disposition: No longer needed.

Location of Asset and Desired Date for Removal to Storage: ASAP - In GC Room 123.

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-Information Technology

Signature



To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 WA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

_____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

_____ Trade _____ Auction _____ Sealed Bids

_____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10.25.18

Signature 

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JUN 01 2018
BOONE COUNTY AUDITOR

BOONE COUNTY
Request for Disposal/Transfer of County Property
Complete, sign, and return to Auditor's Office

Date: 06/08/2018 Fixed Asset Tag Number: 18128

Description of Asset: iPad w/ Wi-Fi & 4G / MD366LL/A

Requested Means of Disposal: Recycle/Trash

Other Information: SERIAL NUMBER: DMPJ108YDVGG

Condition of Asset: OUTDATED

Reason for Disposition: ROUTINE REPLACEMENT

Location of Asset and Desired Date for Removal To Storage: Boone County Courthouse / Floor: 1 / Room: Technology Services - IMMEDIATELY

Was Asset Purchased with Grant Funding? NO

DEPARTMENT: 1241-Juvenile Office SIGNATURE: *Mary Eppin*

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JUN 12 2018

BOONE COUNTY AUDITOR

To be Completed by: AUDITOR

Original Acquisition Date 10-18-2012 G/L Acct for Proceeds 1190-3836 NR

Original Acquisition Amount \$603.24

Original Funding Source 2731

Account Group 1603

To be Completed by : COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method;

Transfer Department Name: _____ Number _____

Location within Department: _____

Individual: _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 474-2018

Date Approve: 10-25-17

Signature *Dennis H. Stovall*

BOONE COUNTY
Request for Disposal/Transfer of County Property
Complete, sign, and return to Auditor's Office

Date: 06/08/2018 Fixed Asset Tag Number: 18481

Description of Asset: iPad w/ Wi-Fi & 4G / MD516LL/A

Requested Means of Disposal: Recycle/Trash

Other Information: SERIAL NUMBER: DMPJMXPCF188

Condition of Asset: OUTDATED

Reason for Disposition: ROUTINE REPLACEMENT

Location of Asset and Desired Date for Removal To Storage: Boone County Courthouse / Floor: 1 / Room: Technology Services - IMMEDIATELY

Was Asset Purchased with Grant Funding? NO

DEPARTMENT: 1241-Juvenile Office SIGNATURE:



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JUN 12 2018

BOONE COUNTY AUDITOR

To be Completed by: AUDITOR

Original Acquisition Date 6-14-13 G/L Acct for Proceeds 1190-3836 HQ

Original Acquisition Amount \$639.01

Original Funding Source 2731

Account Group 1603

To be Completed by : COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method;

Transfer Department Name: _____ Number _____

Location within Department: _____

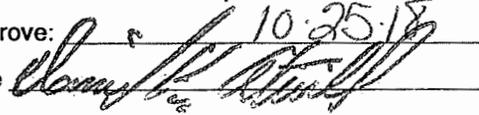
Individual: _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 474-2018

Date Approve: 10-25-18

Signature 

BOONE COUNTY
Request for Disposal/Transfer of County Property
Complete, sign, and return to Auditor's Office

Date: 06/08/2018 Fixed Asset Tag Number: <none>
Description of Asset: Portable Media Projector / EX50
Requested Means of Disposal: Recycle/Trash
Other Information: SERIAL NUMBER: L69F886515L
Condition of Asset: OUTDATED
Reason for Disposition: ROUTINE REPLACEMENT
Location of Asset and Desired Date for Removal To Storage: Boone County Courthouse / Floor: 1 / Room: Technology Services - IMMEDIATELY

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BOONE COUNTY AUDITOR

Was Asset Purchased with Grant Funding? NO

DEPARTMENT: 1210 SIGNATURE: Mary Eppis

To be Completed by: AUDITOR

Original Acquisition Date No Data G/L Acct for Proceeds 1190-3836 NA
Original Acquisition Amount _____
Original Funding Source _____
Account Group _____

To be Completed by : COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method;
____ Transfer Department Name: _____ Number _____
Location within Department: _____
Individual: _____
____ Trade _____ Auction _____ Sealed Bids
____ Other Explain _____

Commission Order Number 474-2018
Date Approve: 10-25-18
Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 6/8/2018

Fixed Asset Tag Number: N/A

Description of Asset: MISC NOTEBOOK BATTERIES

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BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset:

Reason for Disposition: BROKEN

Location of Asset and Desired Date for Removal to Storage: IMMEDIATELY / COURT TARRANT / SERVICE S

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: Circuit Court 1210

Signature: *May Epps*

To be Completed by: AUDITOR
Original Acquisition Date: No Data

G/L Account for Proceeds: 1190-3836 HA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number: 474-2018

Date Approved: 10-25-18

Signature: *Clayton K. Atwell*

BOONE COUNTY
Request for Disposal/Transfer of County Property
Complete, sign, and return to Auditor's Office

Date: 06/08/2018 Fixed Asset Tag Number: 17840
 Description of Asset: TWAIN Scanner / Fi-6130
 Requested Means of Disposal: Recycle/Trash
 Other Information: SERIAL NUMBER: 382521
 Condition of Asset: FAIR
 Reason for Disposition: ROUTINE REPLACEMENT
 Location of Asset and Desired Date for Removal To Storage: Boone County Courthouse / Floor: 1 / Room: Technology Services - IMMEDIATELY

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 JUN 12 2018
 BOONE COUNTY AUDITOR

Was Asset Purchased with Grant Funding? NO

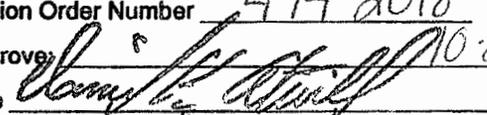
DEPARTMENT: 1221-Circuit Clerk SIGNATURE: 

To be Completed by: AUDITOR

Original Acquisition Date 12-31-11 G/L Acct for Proceeds 1190-3836 HA
 Original Acquisition Amount \$918.17
 Original Funding Source 2731
 Account Group 1603

To be Completed by : COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method;
 Transfer Department Name: _____ Number _____
 Location within Department: _____
 Individual: _____
 Trade Auction Sealed Bids
 Other Explain _____

Commission Order Number 474-2018
 Date Approve: 10-25-18
 Signature 

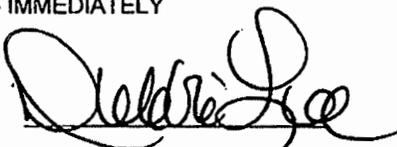
BOONE COUNTY
Request for Disposal/Transfer of County Property
Complete, sign, and return to Auditor's Office

Date: 06/08/2018 Fixed Asset Tag Number: 18169
 Description of Asset: TWAIN Scanner / FI-6130z
 Requested Means of Disposal: Recycle/Trash
 Other Information: SERIAL NUMBER: 477952
 Condition of Asset: FAIR
 Reason for Disposition: ROUTINE REPLACEMENT
 Location of Asset and Desired Date for Removal To Storage: Boone County Courthouse / Floor: 1 / Room: Technology Services - IMMEDIATELY

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 JUN 12 2018
 BOONE COUNTY AUDITOR

Was Asset Purchased with Grant Funding? NO

DEPARTMENT: 1221-Circuit Clerk SIGNATURE:



To be Completed by: AUDITOR

Original Acquisition Date 10-26-12 G/L Acct for Proceeds 1190-3836 HA
 Original Acquisition Amount \$845.00
 Original Funding Source 2731
 Account Group 1603

To be Completed by : COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method;

Transfer Department Name: _____ Number _____
 Location within Department: _____
 Individual: _____
 Trade Auction Sealed Bids
 Other Explain _____

Commission Order Number 474-2018
 Date Approve: 10-25-18
 Signature 

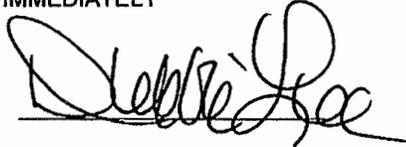
BOONE COUNTY
Request for Disposal/Transfer of County Property
Complete, sign, and return to Auditor's Office

Date: 06/08/2018 Fixed Asset Tag Number: 18230
Description of Asset: TWAIN Scanner / FI-6130z
Requested Means of Disposal: Recycle/Trash
Other Information: SERIAL NUMBER: 637524
Condition of Asset: FAIR
Reason for Disposition: ROUTINE REPLACEMENT
Location of Asset and Desired Date for Removal To Storage: Boone County Courthouse / Floor: 1 / Room: Technology Services - IMMEDIATELY

RECEIVED
JUN 12 2018
BOONE COUNTY AUDITOR

Was Asset Purchased with Grant Funding? NO

DEPARTMENT: 1221-Circuit Clerk SIGNATURE:



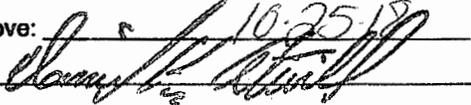
To be Completed by: AUDITOR

Original Acquisition Date 1-18-13 G/L Acct for Proceeds 1190-3836 HR
Original Acquisition Amount \$845.00
Original Funding Source 2731
Account Group 1603

To be Completed by : COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method;

Transfer Department Name: _____ Number _____
Location within Department: _____
Individual: _____
 Trade Auction Sealed Bids
 Other Explain _____

Commission Order Number 474-2018
Date Approve: 10-25-18
Signature 

BOONE COUNTY
Request for Disposal/Transfer of County Property
Complete, sign, and return to Auditor's Office

Date: 06/08/2018 Fixed Asset Tag Number: 16429
 Description of Asset: Network Printer / LaserJet 4250
 Requested Means of Disposal: Recycle/Trash
 Other Information: SERIAL NUMBER: CNRXY01709
 Condition of Asset: OUTDATED
 Reason for Disposition: ROUTINE REPLACEMENT
 Location of Asset and Desired Date for Removal To Storage: Boone County Courthouse / Floor: 1 / Room: Technology Services - IMMEDIATELY

RECEIVED
 JUN 12 2018
BOONE COUNTY AUDITOR

Was Asset Purchased with Grant Funding? NO

DEPARTMENT: 1210-Circuit Court SIGNATURE: _____

May Eppis

To be Completed by: AUDITOR

Original Acquisition Date 12-14-07 G/L Acct for Proceeds 1190-3836 HA
 Original Acquisition Amount \$1,051.55
 Original Funding Source 2731
 Account Group 1603

To be Completed by : COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method;

Transfer Department Name: _____ Number _____
 Location within Department: _____
 Individual: _____
 Trade Auction Sealed Bids
 Other Explain _____

Commission Order Number 474-2018
 Date Approve: 6/25/18
 Signature *[Signature]*

BOONE COUNTY
Request for Disposal/Transfer of County Property
Complete, sign, and return to Auditor's Office

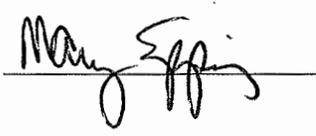
Date: 06/08/2018 Fixed Asset Tag Number: 18101
 Description of Asset: iPad w/ Wi-Fi & 4G / MD366LL/A
 Requested Means of Disposal: Recycle/Trash
 Other Information: SERIAL NUMBER: DYTHHFC9DVGG
 Condition of Asset: OUTDATED
 Reason for Disposition: ROUTINE REPLACEMENT

RECEIVED
 JUN 12 2018
BOONE COUNTY AUDITOR

Location of Asset and Desired Date for Removal To Storage: Boone County Courthouse / Floor: 1 / Room: Technology Services - IMMEDIATELY

Was Asset Purchased with Grant Funding? NO

DEPARTMENT: 2850-Administration of Justice SIGNATURE: _____



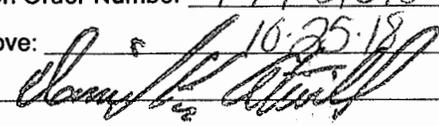
To be Completed by: AUDITOR

Original Acquisition Date 8-9-12 G/L Acct for Proceeds 2850-3836 HA
 Original Acquisition Amount \$628.31
 Original Funding Source 2742
 Account Group 1603

To be Completed by : COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method;

Transfer Department Name: _____ Number _____
 Location within Department: _____
 Individual: _____
 Trade Auction Sealed Bids
 Other Explain _____

Commission Order Number 474-2018
 Date Approve: 10-25-18
 Signature 

BOONE COUNTY
Request for Disposal/Transfer of County Property
Complete, sign, and return to Auditor's Office

Date: 06/08/2018 Fixed Asset Tag Number: 18486
 Description of Asset: iPad w/ Wi-Fi & 4G / MD516LL/A
 Requested Means of Disposal: Recycle/Trash
 Other Information: SERIAL NUMBER: DMPJP4YLF188
 Condition of Asset: OUTDATED
 Reason for Disposition: ROUTINE REPLACEMENT

RECEIVED

JUN 12 2018

BOONE COUNTY AUDITOR

Location of Asset and Desired Date for Removal To Storage: Boone County Courthouse / Floor: 2 / Room: Judge's Office - IMMEDIATELY

Was Asset Purchased with Grant Funding? NO

DEPARTMENT: 1210-Circuit Court SIGNATURE: Mary Egan

To be Completed by: AUDITOR

Original Acquisition Date 6-14-13 G/L Acct for Proceeds 1190-3836 HA
 Original Acquisition Amount \$639.01
 Original Funding Source 2731
 Account Group 1603

To be Completed by : COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method;

Transfer Department Name: _____ Number _____
 Location within Department: _____
 Individual: _____
 Trade Auction Sealed Bids
 Other Explain _____

Commission Order Number 474-2018
 Date Approve 10-25-18
 Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: ~~6/18/16~~ **6-19-18** *J*

Fixed Asset Tag Number: No Tags

Description of Asset: UPS Battery - APC Battery: Serial #090416V13 UPS Battery - APC Dual Battery:
Serial #3A1504X25417 Canon iP100 CVSA Printer - Serial #ACTS24635

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset:

Reason for Disposition: Replacements

Location of Asset and Desired Date for Removal to Storage: ASAP - In GC Room 123.

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1251 - Sheriff

Signature



To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 NA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

_____ Transfer Department Name _____ Number _____

Location within Department _____

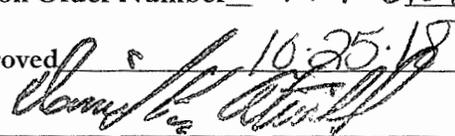
Individual _____

_____ Trade _____ Auction _____ Sealed Bids

_____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10.25.18

Signature 

RECEIVED

JUN 19 2018

BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 06/25/2018

FIXED ASSET TAG NUMBER: 00011597

DESCRIPTION: HP LASERJET 5000N
PRINTER LASER MONOCHROME

RECEIVED

JUN 29 2018

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

BOONE COUNTY AUDITOR

CONDITION OF ASSET: PURCHASED 06/04/1998

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PUBLIC WORKS 2040 SIGNATURE: Km

AUDITOR

ORIGINAL ACQUISITION DATE 1998/06/04

G/L ACCOUNT FOR PROCEEDS 2045-3836 NA

ORIGINAL ACQUISITION AMOUNT 2,228.06

ORIGINAL FUNDING SOURCE 2741

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10.25.18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 06/19/2018

FIXED ASSET TAG NUMBER: 00012703

DESCRIPTION: HP LASERJET 2100M
PRINTER LASER MONOCHROME

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: LOANER IN PLACE

REASON FOR DISPOSITION: NEEDS REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: SHERIFF 1251 SIGNATURE: 

AUDITOR

ORIGINAL ACQUISITION DATE 2000/12/31

G/L ACCOUNT FOR PROCEEDS 1190-3836 HA

ORIGINAL ACQUISITION AMOUNT 1,385.00

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

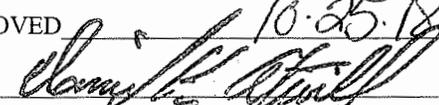
INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE 

RECEIVED
JUN 29 2018
BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 06/01/2018

FIXED ASSET TAG NUMBER: 00018236

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

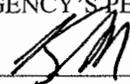
OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PUBLIC ADMINISTRATOR¹²⁰⁰ SIGNATURE: 

RECEIVED

JUN 29 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/02/22

G/L ACCOUNT FOR PROCEEDS 1190-3836 HA

ORIGINAL ACQUISITION AMOUNT 602.23

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

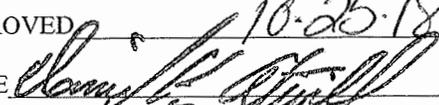
INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10.25.18

SIGNATURE 

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 06/14/2018 FIXED ASSET TAG NUMBER: 00018303

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PROSECUTING ATTORNI¹²⁶¹ SIGNATURE: *JM*

RECEIVED

JUN 29 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25 G/L ACCOUNT FOR PROCEEDS 1190-3836 Ha

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

___ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

___ TRADE ___ AUCTION ___ SEALED BIDS

___ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE *[Signature]*

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 06/14/2018

FIXED ASSET TAG NUMBER: 00018304

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP to GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: 1261 PROSECUTING ATTORNI SIGNATURE: [Signature]

RECEIVED

JUN 29 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 1190-3836 NA

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

___ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

___ TRADE ___ AUCTION ___ SEALED BIDS

___ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10:25:18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 06/14/2018

FIXED ASSET TAG NUMBER: 00018305

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PROSECUTING ATTORNI SIGNATURE: *RM*

RECEIVED

JUN 29 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 1190-3836 HA

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE *[Signature]*

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 06/12/2018

FIXED ASSET TAG NUMBER: 00018312

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

RECEIVED

REQUESTED MEANS OF DISPOSAL: _____

JUN 29 2018

OTHER INFORMATION: _____

BOONE COUNTY AUDITOR

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PUBLIC ADMINISTRATOR SIGNATURE: SM

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 1190-3836 NA

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 06/01/2018

FIXED ASSET TAG NUMBER: 00018313

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

RECEIVED

OTHER INFORMATION: _____

JUN 29 2018

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

BOONE COUNTY AUDITOR

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PUBLIC ADMINISTRATOR¹²⁰⁰ SIGNATURE: *BM*

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 1190-383642

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE *[Signature]*

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 05/25/2018

FIXED ASSET TAG NUMBER: 00018314

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

RECEIVED

OTHER INFORMATION: _____

JUN 29 2018

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

BOONE COUNTY AUDITOR

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PUBLIC ADMINISTRATOR SIGNATURE: *BM*

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 1190-3836 HR

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE *[Signature]*

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 06/01/2018

FIXED ASSET TAG NUMBER: 00018327

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

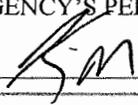
OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PUBLIC ADMINISTRATOR SIGNATURE: 

RECEIVED

JUN 29 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 1190-3836 HO

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

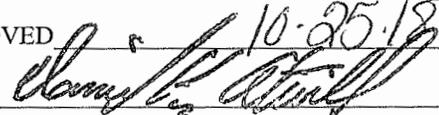
INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE 

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 06/14/2018

FIXED ASSET TAG NUMBER: 00018337

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

RECEIVED

OTHER INFORMATION: _____

JUN 29 2018

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

BOONE COUNTY AUDITOR

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PROSECUTING ATTORNI SIGNATURE: *KM*

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 1190-3836 HQ

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE *[Signature]*

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 06/14/2018

FIXED ASSET TAG NUMBER: 00018339

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

RECEIVED

REQUESTED MEANS OF DISPOSAL: _____

JUN 29 2018

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

BOONE COUNTY AUDITOR

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: 1261 PROSECUTING ATTORNI

SIGNATURE: KM

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 1190-3836 HA

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 06/14/2018

FIXED ASSET TAG NUMBER: 00018340

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PROSECUTING ATTORNI SIGNATURE: 

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 1190-3836 HA

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE 

RECEIVED

JUN 29 2018

BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 06/21/2018

FIXED ASSET TAG NUMBER: 00018341

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

RECEIVED

REQUESTED MEANS OF DISPOSAL: _____

JUN 29 2018

OTHER INFORMATION: _____

BOONE COUNTY AUDITOR

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PROSECUTING ATTORNI SIGNATURE: *SM*

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 1190-3836 HA

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE *[Signature]*

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 06/14/2018

FIXED ASSET TAG NUMBER: 00018356

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: 1261 PROSECUTING ATTORNI SIGNATURE: Km

RECEIVED
JUN 29 2018
BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 1190-3836 HA

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 06/14/2018

FIXED ASSET TAG NUMBER: 00018357

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: 1261 PROSECUTING ATTORNI SIGNATURE: *SM*

RECEIVED
JUN 29 2018
BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 1190-3836 NA

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE *Dennis H. Atwell*

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 06/25/2018

FIXED ASSET TAG NUMBER: 00018358

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

RECEIVED

REQUESTED MEANS OF DISPOSAL: _____

JUN 29 2018

OTHER INFORMATION: _____

BOONE COUNTY AUDITOR

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PROSECUTING ATTORNI SIGNATURE: *KMA*

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 1190-3836 *HA*

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

___ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

___ TRADE ___ AUCTION ___ SEALED BIDS

___ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE *[Signature]*

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 06/12/2018

FIXED ASSET TAG NUMBER: 00018359

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: 1261 PROSECUTING ATTORNI SIGNATURE: SM

RECEIVED

JUN 29 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 2800-3836710

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2780

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10.25.18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 05/22/2018 FIXED ASSET TAG NUMBER: 00018566

DESCRIPTION: HP D8C55UT
PC WORKSTATION

RECEIVED

REQUESTED MEANS OF DISPOSAL: _____

JUN 29 2018

OTHER INFORMATION: _____

BOONE COUNTY AUDITOR

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PROSECUTING ATTORNI SIGNATURE: *SM*

AUDITOR

ORIGINAL ACQUISITION DATE 2013/08/16 G/L ACCOUNT FOR PROCEEDS 1190-3836 HQ

ORIGINAL ACQUISITION AMOUNT 532.56

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

___ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

___ TRADE ___ AUCTION ___ SEALED BIDS

___ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE *[Signature]*

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 05/22/2018

FIXED ASSET TAG NUMBER: 00018567

DESCRIPTION: HP D8C55UT
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: 1261 PROSECUTING ATTORNI SIGNATURE: *JM*

RECEIVED

JUN 29 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/08/16

G/L ACCOUNT FOR PROCEEDS 1190-3836 HA

ORIGINAL ACQUISITION AMOUNT 532.56

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

 TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

 TRADE AUCTION SEALED BIDS

 OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE *[Signature]*

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 05/22/2018

FIXED ASSET TAG NUMBER: 00018612

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

RECEIVED

REQUESTED MEANS OF DISPOSAL: _____

JUN 29 2018

OTHER INFORMATION: _____

BOONE COUNTY AUDITOR

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: 1261 PROSECUTING ATTORNI SIGNATURE: [Signature]

AUDITOR

ORIGINAL ACQUISITION DATE 2013/10/24

G/L ACCOUNT FOR PROCEEDS 1190-3836 HQ

ORIGINAL ACQUISITION AMOUNT 596.29

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 05/24/2018

FIXED ASSET TAG NUMBER: 00018570

DESCRIPTION: HP D8C55UT
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PURCHASING 1118 SIGNATURE: *SM*

RECEIVED
JUN 29 2018
BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/08/16

G/L ACCOUNT FOR PROCEEDS 1190-383640

ORIGINAL ACQUISITION AMOUNT 532.56

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE *[Signature]*

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 05/24/2018 FIXED ASSET TAG NUMBER: 00018571

DESCRIPTION: HP D8C55UT
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PURCHASING 1118 SIGNATURE: *[Signature]*

RECEIVED
JUN 29 2018
BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/08/16 G/L ACCOUNT FOR PROCEEDS 1190-3836 HQ

ORIGINAL ACQUISITION AMOUNT 532.56

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE *[Signature]*

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 05/22/2018 FIXED ASSET TAG NUMBER: 00018572

DESCRIPTION: HP D8C55UT
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

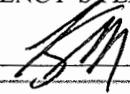
OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PURCHASING 1118 SIGNATURE: 

RECEIVED
JUN 29 2018
BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/08/16 G/L ACCOUNT FOR PROCEEDS 1190-3836 HQ

ORIGINAL ACQUISITION AMOUNT 532.56

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

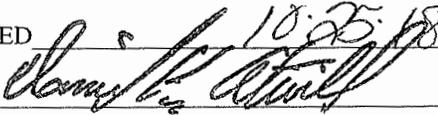
INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE 

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

RECEIVED

Date: 06/29/2018

Fixed Asset Tag Number: 18708

JUN 29 2018

Description of Asset: Switch 24-Port 2960 - Catalyst 2960

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): FCQ1535Y6FN

Condition of Asset: Working

Reason for Disposition: No Longer Needed

Location of Asset and Desired Date for Removal to Storage: ASAP in GC Room 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: Joint Communications 2701

Signature RM

To be Completed by: AUDITOR

Original Acquisition Date 11-1-13

G/L Account for Proceeds 2701-3836 HA

Original Acquisition Amount \$1,966.87

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY
Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 06/29/2018

Fixed Asset Tag Number: 18707

RECEIVED

JUN 29 2018

Description of Asset: Switch 24-Port 2960 - Catalyst 2960

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): FCQ1535Y6F2

Condition of Asset: Working

Reason for Disposition: No Longer Needed

Location of Asset and Desired Date for Removal to Storage: ASAP in GC Room 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: Joint Communications

Signature KM

To be Completed by: AUDITOR

Original Acquisition Date 11-1-13

G/L Account for Proceeds 2701-3836 NA

Original Acquisition Amount \$ 1,966.87

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

RECEIVED

JUN 29 2018

BOONE COUNTY AUDITOR

Date: 06/29/2018

Fixed Asset Tag Number: 18706

Description of Asset: CISCO Advanced IP Services - 2800

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): FTX1415AKEU

Condition of Asset: Not Working

Reason for Disposition: No Longer Needed

Location of Asset and Desired Date for Removal to Storage: ASAP in GC Room 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: Joint Communications

Signature TCM

To be Completed by: AUDITOR

Original Acquisition Date 11-1-13

G/L Account for Proceeds 2701-3836 NA

Original Acquisition Amount \$1,096.09

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

RECEIVED

Date: 06/29/2018

Fixed Asset Tag Number: 18030

JUN 29 2018

Description of Asset: CISCO Network Router - 2911

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): FTX1415AKEU

Condition of Asset: Not Working

Reason for Disposition: No Longer Needed

Location of Asset and Desired Date for Removal to Storage: ASAP in GC Room 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: Joint Communications

Signature AM

To be Completed by: AUDITOR

Original Acquisition Date 6-20-12

G/L Account for Proceeds 2701-3836 HA

Original Acquisition Amount \$1,621.04

Original Funding Source 2772

Account Group 1603

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/03/2018

FIXED ASSET TAG NUMBER: 00016623

DESCRIPTION: KONICA MINOLTA MAGICOLOR 2530DL
PRINTER LASER COLOR

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: PURCHASED 10/14/2008

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: SHERIFF 1251 SIGNATURE: SM

RECEIVED

JUL 16 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2008/12/31

G/L ACCOUNT FOR PROCEEDS N/A Ha

ORIGINAL ACQUISITION AMOUNT 1.00

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

 TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

 TRADE AUCTION SEALED BIDS

 OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10/25/18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/13/2018

FIXED ASSET TAG NUMBER: 00012689

DESCRIPTION: IBM 3570 MAGSTAR
TAPE DRIVE

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: PURCHASED 2000

REASON FOR DISPOSITION: NO LONGER NEEDED

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: INFORMATION TECHNOL SIGNATURE: Km

RECEIVED

JUL 16 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2000/12/31

G/L ACCOUNT FOR PROCEEDS 1190-3835 NA

ORIGINAL ACQUISITION AMOUNT 20,650.00

ORIGINAL FUNDING SOURCE _____

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

___ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

___ TRADE ___ AUCTION ___ SEALED BIDS

___ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/13/2018

FIXED ASSET TAG NUMBER: 00013517

DESCRIPTION: IBM 9348-002
TAPE DRIVE

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: PURCHASED 2002

REASON FOR DISPOSITION: NO LONGER NEEDED

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: INFORMATION TECHNOL SIGNATURE: *RM*

RECEIVED

JUL 16 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2002/11/06

G/L ACCOUNT FOR PROCEEDS 1190-383642

ORIGINAL ACQUISITION AMOUNT 1,015.00

ORIGINAL FUNDING SOURCE _____

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

___ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

___ TRADE ___ AUCTION ___ SEALED BIDS

___ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10.25.18

SIGNATURE *Samuel H. Atwell*

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/13/2018

FIXED ASSET TAG NUMBER: 00013625

DESCRIPTION: LEXMARK T520N
PRINTER LASER MONOCHROME

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: BOUGHT 2002

REASON FOR DISPOSITION: NO LONGER NEEDED

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: MAIL SERVICES 1194 SIGNATURE: Km

RECEIVED
JUL 16 2018
BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2002/11/20

G/L ACCOUNT FOR PROCEEDS 1190-383642

ORIGINAL ACQUISITION AMOUNT 1,214.18

ORIGINAL FUNDING SOURCE _____

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/13/2018

FIXED ASSET TAG NUMBER: 00015125

DESCRIPTION: CYBERNETIC LTO2
TAPE DRIVE

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: PURCHASED 2005

REASON FOR DISPOSITION: NO LONGER NEEDED

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: INFORMATION TECHNOL ¹¹⁷⁰ SIGNATURE: Km

AUDITOR

ORIGINAL ACQUISITION DATE 2005/10/13

G/L ACCOUNT FOR PROCEEDS 1190-3836 HA

ORIGINAL ACQUISITION AMOUNT 3,228.50

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

RECEIVED

JUL 16 2018

BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/13/2018

FIXED ASSET TAG NUMBER: 00015377

DESCRIPTION: CLI ET2000K-B3
TERMINAL ETHERNET

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: PURCHASED 3/2006

REASON FOR DISPOSITION: NO LONGER NEEDED

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: INFORMATION TECHNOL SIGNATURE: Km

RECEIVED

JUL 16 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2006/03/23

G/L ACCOUNT FOR PROCEEDS 1190-3836 HQ

ORIGINAL ACQUISITION AMOUNT 408.00

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

___ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

___ TRADE ___ AUCTION ___ SEALED BIDS

___ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/13/2018

FIXED ASSET TAG NUMBER: 00015378

DESCRIPTION: CLI ET2000K-B3
TERMINAL ETHERNET

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: PURCHASED IN 3/2006

REASON FOR DISPOSITION: NO LONGER NEEDED

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: INFORMATION TECHNOL SIGNATURE: *LM*

AUDITOR

ORIGINAL ACQUISITION DATE 2006/03/23

G/L ACCOUNT FOR PROCEEDS 1190-3336HQ

ORIGINAL ACQUISITION AMOUNT 408.00

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE *[Signature]*

RECEIVED
JUL 16 2018
BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/13/2018 FIXED ASSET TAG NUMBER: 00015379

DESCRIPTION: CLI ET2000K-B3
TERMINAL ETHERNET

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: PURCHASED IN 3/2006

REASON FOR DISPOSITION: NO LONGER NEEDED

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES/NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: INFORMATION TECHNOLOGY SIGNATURE: Kom

RECEIVED

JUL 16 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2006/03/23

G/L ACCOUNT FOR PROCEEDS 1190-3836 HA

ORIGINAL ACQUISITION AMOUNT 408.00

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/13/2018

FIXED ASSET TAG NUMBER: 00015380

DESCRIPTION: CLI ET2000K-B3
TERMINAL ETHERNET

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: PURCHASED IN 3/2006

REASON FOR DISPOSITION: NO LONGER NEEDED

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: INFORMATION TECHNOL ¹¹⁷⁰ SIGNATURE: *Km*

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JUL 16 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2006/03/23

G/L ACCOUNT FOR PROCEEDS 1190-3836 Ha

ORIGINAL ACQUISITION AMOUNT 408.00

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10.25.18

SIGNATURE *[Signature]*

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/03/2018

FIXED ASSET TAG NUMBER: 00015523

DESCRIPTION: LEXMARK T430DN
PRINTER LASER MONOCHROME

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: PURCHASED 06/07/2006

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: SHERIFF 1251 SIGNATURE: BSM

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BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2006/06/29

G/L ACCOUNT FOR PROCEEDS 1190-3836 *HA*

ORIGINAL ACQUISITION AMOUNT 947.56

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

 TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

 TRADE AUCTION SEALED BIDS

 OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/13/2018

FIXED ASSET TAG NUMBER: 00015587

DESCRIPTION: CYBERNETIC CY-LVDG1
I CLIENT

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: PURCHASED 2006

REASON FOR DISPOSITION: NO LONGER NEEDED

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES/NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: INFORMATION TECHNOL

SIGNATURE: Km

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JUL 16 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2006/07/14

G/L ACCOUNT FOR PROCEEDS 1190-3836 HA

ORIGINAL ACQUISITION AMOUNT 1,249.86

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

___ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

___ TRADE ___ AUCTION ___ SEALED BIDS

___ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 7/25/18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/13/2018

FIXED ASSET TAG NUMBER: 00016135

DESCRIPTION: HP DC5700
PC WORKSTATION

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REQUESTED MEANS OF DISPOSAL: _____

JUL 16 2018

OTHER INFORMATION: _____

BOONE COUNTY AUDITOR

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: NO LONGER NEEDED

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: COUNTY CLERK 1131 SIGNATURE: Kan

AUDITOR

ORIGINAL ACQUISITION DATE 2007/04/12

G/L ACCOUNT FOR PROCEEDS 1190-3836 HA

ORIGINAL ACQUISITION AMOUNT 1,175.21

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

 TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

 TRADE AUCTION SEALED BIDS

 OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/13/2018

FIXED ASSET TAG NUMBER: 00017479

DESCRIPTION: CYBERNETIC CYTLL0108
TAPE DRIVE

RECEIVED

REQUESTED MEANS OF DISPOSAL: _____

JUL 16 2018

OTHER INFORMATION: _____

BOONE COUNTY AUDITOR

CONDITION OF ASSET: PURCHASED 2010

REASON FOR DISPOSITION: NO LONGER NEEDED

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: INFORMATION ¹¹⁷⁰ TECHNOL SIGNATURE: *Km*

AUDITOR

ORIGINAL ACQUISITION DATE 2007/02/01

G/L ACCOUNT FOR PROCEEDS 1190-3836 *HP*

ORIGINAL ACQUISITION AMOUNT 4,579.95

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

 TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

 TRADE AUCTION SEALED BIDS

 OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE *Samuel H. Atwell*

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/13/2018

FIXED ASSET TAG NUMBER: 00017830

DESCRIPTION: CYBERNETIC CY-LIBG1/R
CLIENT

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REQUESTED MEANS OF DISPOSAL: _____

JUL 16 2018

OTHER INFORMATION: _____

BOONE COUNTY AUDITOR

CONDITION OF ASSET: PURCHASED 2011

REASON FOR DISPOSITION: REPLACED DESTROYED TAG #17546 - not need

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: INFORMATION TECHNOLOGY SIGNATURE: Km

AUDITOR

ORIGINAL ACQUISITION DATE 2011/03/01

G/L ACCOUNT FOR PROCEEDS 1190-3836 HQ

ORIGINAL ACQUISITION AMOUNT 1,872.00

ORIGINAL FUNDING SOURCE 2731 - \$1,169.52
2743 - \$402.48

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE ____ AUCTION ____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/13/2018

FIXED ASSET TAG NUMBER: 00017845

DESCRIPTION: CYBERNETIC CYMISAND8/T4
MISAN BACKUP APPLIANCE

RECEIVED

REQUESTED MEANS OF DISPOSAL: _____

JUL 16 2018

OTHER INFORMATION: _____

BOONE COUNTY AUDITOR

CONDITION OF ASSET: NO HARD DRIVE

REASON FOR DISPOSITION: NOT WORKING

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: INFORMATION TECHNOL SIGNATURE: *Km*

AUDITOR

ORIGINAL ACQUISITION DATE 2012/01/26

G/L ACCOUNT FOR PROCEEDS 1190-3836 NA

ORIGINAL ACQUISITION AMOUNT 7,691.84

ORIGINAL FUNDING SOURCE 2731, 2743

ACCOUNT GROUP 1603 \$1,550 \$5,141.84

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

___ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

___ TRADE ___ AUCTION ___ SEALED BIDS

___ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE *Clayton H. Atwell*

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/09/2018

FIXED ASSET TAG NUMBER: 00018338

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PROSECUTING ATTORNEY ¹²⁶¹ SIGNATURE: *[Signature]*

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JUL 16 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 1190-3836 HA

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE *[Signature]*

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/11/2018

FIXED ASSET TAG NUMBER: 00018342

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: RECORDER 1160 SIGNATURE: ASM

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BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 1190-3836 Ha

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/11/2018

FIXED ASSET TAG NUMBER: 00018344

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: RECORDER 1160 SIGNATURE: [Signature]

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JUL 16 2018
BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 1190-3836 KR

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

___ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

___ TRADE ___ AUCTION ___ SEALED BIDS

___ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 7-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/25/2018

FIXED ASSET TAG NUMBER: 00018355

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PUBLIC WORKS 2040 SIGNATURE: *SM*

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BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 2040-3836 NR

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2741

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE ____ AUCTION ____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10:25/18

SIGNATURE *[Signature]*

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/13/2018

FIXED ASSET TAG NUMBER: 00018347

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: RECORDER 1160 SIGNATURE: KM

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JUL 16 2018

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 1190-3836 KA

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

 TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

 TRADE AUCTION SEALED BIDS

 OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/11/2018

FIXED ASSET TAG NUMBER: 00018348

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: RECORDER 1160 SIGNATURE: *[Signature]*

RECEIVED
JUL 16 2018
BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 1190-3836 AR

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2780

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE *[Signature]*

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/11/2018

FIXED ASSET TAG NUMBER: 00018349

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: RECORDER 1160 SIGNATURE: *ZM*

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JUL 16 2018
BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL ACQUISITION DATE 2013/04/25

G/L ACCOUNT FOR PROCEEDS 1190-3836 HA

ORIGINAL ACQUISITION AMOUNT 589.74

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE *Donna K. Atwell*

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 07/03/2018

FIXED ASSET TAG NUMBER: 00018565

DESCRIPTION: HP D8C55UT
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARD DRIVES AND MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP in GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PROSECUTING ATTORNI¹²⁶¹ SIGNATURE: *Jm*

AUDITOR

ORIGINAL ACQUISITION DATE 2013/08/16

G/L ACCOUNT FOR PROCEEDS 1190-3836 *HR*

ORIGINAL ACQUISITION AMOUNT 532.56

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE *David K. Atwell*

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JUL 16 2018
BOONE COUNTY AUDITOR

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 07/13/2018

Fixed Asset Tag Number: N/A

Description of Asset: Monitor Arms

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BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset:

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: ASAP in GC Room 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170 Info Tech

Signature Sm

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 4A

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 07/13/2018

Fixed Asset Tag Number: N/A

Description of Asset: Misc Keyboards and Server Rails

10F3

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

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Other Information (Serial number, etc.):

BOONE COUNTY AUDITOR

Condition of Asset:

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: ASAP in GC Room 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature: *[Handwritten Signature]*

To be Completed by: AUDITOR NO Data

Original Acquisition Date _____

G/L Account for Proceeds 1190-3836 HA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature: *[Handwritten Signature]*

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 07/13/2018

Fixed Asset Tag Number: N/A

Description of Asset: Misc Keyboards and Server Rails

20F3

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset:

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: ASAP in GC Room 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature SM

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 NA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

_____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

_____ Trade _____ Auction _____ Sealed Bids

_____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Signature]



BOONE COUNTY
Request for Disposal/Transfer of County Property
Complete, sign, and return to Auditor's Office

Date: 07/13/2018

Fixed Asset Tag Number: N/A

Description of Asset: Misc Keyboards and Server Rails

30F3

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JUL 16 2018

BOONE COUNTY AUDITOR
COPY

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset:

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: ASAP in GC Room 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature Sm

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 HQ

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 07/13/2018

Fixed Asset Tag Number: N/A

Description of Asset: MultiTech Systems MM900C/96; SN: 772319

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset:

Reason for Disposition: No longer needed

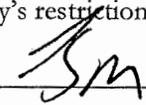
Location of Asset and Desired Date for Removal to Storage: ASAP in GC Room 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature 

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 NA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

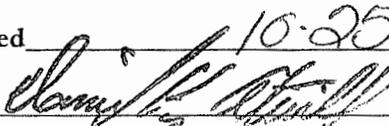
Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature 

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JUL 16 2018
BOONE COUNTY AUDITOR

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 07/13/2018

Fixed Asset Tag Number: N/A

Description of Asset: MultiModem II MT5600BA

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): SN: 8782995

Condition of Asset:

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: ASAP in GC Room 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature LM

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 HA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 474-2018

Date Approved 10/25/18

Signature [Signature]

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JUL 16 2018
BOONE COUNTY AUDITOR

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 07/13/2018

Fixed Asset Tag Number: N/A

10F3

Description of Asset: Misc. Computer Cables

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset:

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: ASAP in GC Room 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature KM

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 HQ

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10.25.18

Signature [Signature]

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JUL 16 2018
BOONE COUNTY AUDITOR

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 07/13/2018

Fixed Asset Tag Number: N/A

2 of 3

Description of Asset: Misc. Computer Cables

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset:

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: ASAP in GC Room 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature lc

To be Completed by: AUDITOR

Original Acquisition Date No Data G/L Account for Proceeds 1190-3836

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

_____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

_____ Trade _____ Auction _____ Sealed Bids

_____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Signature]

RECEIVED
JUL 16 2018
BOONE COUNTY AUDITOR

BOONE COUNTY
Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 07/13/2018

Fixed Asset Tag Number: N/A

3 of 3

Description of Asset: Misc. Computer Cables

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset:

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: ASAP in GC Room 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature KM

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 NA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

_____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

_____ Trade _____ Auction _____ Sealed Bids

_____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature *[Signature]*

RECEIVED
JUL 16 2018
BOONE COUNTY AUDITOR

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 07/13/2018

Fixed Asset Tag Number: N/A

Description of Asset: Misc. Computer Cables

10F2

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset:

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: ASAP in GC Room 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170 - IT

Signature: km

To be Completed by: AUDITOR

Original Acquisition Date: No Data

G/L Account for Proceeds: 1190-3836 4R

Original Acquisition Amount: _____

Original Funding Source: _____

Account Group: _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number: 474-2018

Date Approved: 10-25-18

Signature: [Signature]

RECEIVED
JUL 16 2018
BOONE COUNTY AUDITOR

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 07/13/2018

Fixed Asset Tag Number: N/A

Description of Asset: Misc. Computer Cables

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset:

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: ASAP in GC Room 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170-IT

Signature Sm

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 HA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Signature]

20F2
RECEIVED
JUL 16 2018
BOONE COUNTY AUDITOR

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 09/13/2018

Fixed Asset Tag Number: N/A

Description of Asset: HP LaserJet 4250n Printer & Toner Box

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): SN: CNGXD33475

Condition of Asset: Unknown

Reason for Disposition: No Longer Needed

Location of Asset and Desired Date for Removal to Storage: ASAP in GC Room 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: IT-1170

Signature AM

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature [Signature]

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SEP 2 2018
BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 09/28/2018

FIXED ASSET TAG NUMBER: 00015441

DESCRIPTION: HP LP2065
MONITOR LCD 20 INCH

REQUESTED MEANS OF DISPOSAL: _____

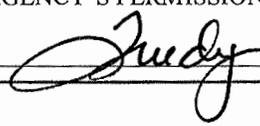
OTHER INFORMATION: _____

CONDITION OF ASSET: NON-WORKING

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP - In GC Room 123.

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: TREASURER 1140 SIGNATURE: 

AUDITOR

ORIGINAL ACQUISITION DATE 2006/05/05

G/L ACCOUNT FOR PROCEEDS 1190-3836 HA

ORIGINAL ACQUISITION AMOUNT 637.00

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE 

RECEIVED

OCT 07 2018

BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 10/01/2018

FIXED ASSET TAG NUMBER: 00018235

DESCRIPTION: HP COMPAQ 6300
PC WORKSTATION

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: HARDDRIVE/MEMORY REMOVED

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP - In GC Room 123.

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: TREASURER 1190 SIGNATURE: *Judy*

AUDITOR

ORIGINAL ACQUISITION DATE 2013/02/22

G/L ACCOUNT FOR PROCEEDS 1190-3836 119

ORIGINAL ACQUISITION AMOUNT 602.23

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

___ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

___ TRADE ___ AUCTION ___ SEALED BIDS

___ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE *[Signature]*

RECEIVED
OCT 01 2018
BOONE COUNTY AUDITOR

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 10/15/18

Fixed Asset Tag Number: No Tag

Description of Asset: 3COM Switch

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): Serial #0100/7PWF001664

Condition of Asset:

Reason for Disposition:

Location of Asset and Desired Date for Removal to Storage: ASAP - In GC Room 123.

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: Sheriff

1251

Signature



To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 AP

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

_____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

_____ Trade _____ Auction _____ Sealed Bids

_____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature 

RECEIVED

OCT 15 2018

BOONE COUNTY AUDITOR

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 10/15/18

Fixed Asset Tag Number: No Tag

Description of Asset: APC UPS

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): Serial #JB0637025098

Condition of Asset: Not Working

Reason for Disposition:

Location of Asset and Desired Date for Removal to Storage: ASAP - In GC Room 123.

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: Sheriff

1251

Signature

Judy

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 HA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

_____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

_____ Trade _____ Auction _____ Sealed Bids

_____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10-25-18

Signature *Charles A. Stull*

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OCT 15 2018

BOONE COUNTY AUDITOR

RECEIVED

OCT 12 2018

BOONE COUNTY

BOONE COUNTY AUDITOR

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 10/12/2018

FIXED ASSET TAG NUMBER: 00016165

DESCRIPTION: HP L1940T
MONITOR LCD 19 INCH

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: PURCHASED 2007 - NON-WORKING

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP - In GC Room 123.

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PURCHASING 1118

SIGNATURE: Judy

AUDITOR

ORIGINAL ACQUISITION DATE 2007/04/20

G/L ACCOUNT FOR PROCEEDS _____

ORIGINAL ACQUISITION AMOUNT 220.00

ORIGINAL FUNDING SOURCE 2741

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

___ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

___ TRADE ___ AUCTION ___ SEALED BIDS

___ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

RECEIVED

OCT 12 2018

BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 10/12/2018

FIXED ASSET TAG NUMBER: 00015921

DESCRIPTION: PANASONIC TOUGHBOOK 18 TABLET
LAPTOP NOTEBOOK

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: NON-WORKING

REASON FOR DISPOSITION: NO LONGER NEEDED

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP - In GC Room 123.

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: INFORMATION TECHNOLOGY SIGNATURE: Judy

AUDITOR

ORIGINAL ACQUISITION DATE 2006/12/19

G/L ACCOUNT FOR PROCEEDS 1190-3836 HQ

ORIGINAL ACQUISITION AMOUNT 2,898.30

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

 TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

 TRADE AUCTION SEALED BIDS

 OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 10/05/2018

FIXED ASSET TAG NUMBER: N/A

DESCRIPTION: MNI
Monitor

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: Model - ML970W Serial #ML970W0714090142

CONDITION OF ASSET: POOR

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP - In GC Room 123.

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: SHERIFF 1251 SIGNATURE: Judy

AUDITOR

ORIGINAL ACQUISITION DATE No Data

G/L ACCOUNT FOR PROCEEDS 1190-383674

ORIGINAL ACQUISITION AMOUNT _____

ORIGINAL FUNDING SOURCE _____

ACCOUNT GROUP _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

TRADE AUCTION SEALED BIDS

OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE [Signature]

RECEIVED

OCT 05 2018

BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 10/05/2018

FIXED ASSET TAG NUMBER: 00014106

DESCRIPTION: IBM INFOPRINT 1332
PRINTER LASER MONOCHROME

REQUESTED MEANS OF DISPOSAL: _____

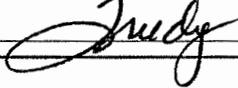
OTHER INFORMATION: _____

CONDITION OF ASSET: PURCHASED 2003 - VERY POOR

REASON FOR DISPOSITION: REPLACEMENT

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP - In GC Room 123.

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: SHERIFF 1251 SIGNATURE: 

AUDITOR

ORIGINAL ACQUISITION DATE 2003/08/28

G/L ACCOUNT FOR PROCEEDS 1190-3836 HQ

ORIGINAL ACQUISITION AMOUNT 3,339.37

ORIGINAL FUNDING SOURCE 2731

ACCOUNT GROUP 1603

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

 TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

 TRADE AUCTION SEALED BIDS

 OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 474-2018

DATE APPROVED 10-25-18

SIGNATURE 

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OCT 05 2018

BOONE COUNTY AUDITOR

BOONE COUNTY
Request for Disposal/Transfer of County Property
Complete, sign, and return to Auditor's Office

Date: 8/3/18

Fixed Asset Tag Number: No Tag

Description of Asset: APC - RBC - UPS Battery

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): Serial #3A1147X15577

Condition of Asset:

Reason for Disposition: Dead Battery

Location of Asset and Desired Date for Removal to Storage: GC Room 123 - ASAP

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: Sheriff

Signature *Judy*

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 NA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade ____ Auction ____ Sealed Bids

____ Other Explain _____

Commission Order Number 474-2018

Date Approved 10.25.18

Signature *David L. Atwell*

RECEIVED

AUG 03 2018

BOONE COUNTY AUDITOR

CERTIFIED COPY OF ORDER

STATE OF MISSOURI }
County of Boone } ea.

October Session of the October Adjourned

Term. 20 18

In the County Commission of said county, on the 25th day of October 20 18

the following, among other proceedings, were had, viz:

Now on this day the County Commission of the County of Boone does hereby approve the request by the Purchasing Department to dispose of the following attached list of surplus equipment by auction on GovDeals or by destruction for whatever is not suitable for auction.

It is further ordered the Presiding Commissioner is hereby authorized to sign said Request for Disposal forms.

Done this 25th day of October, 2018.

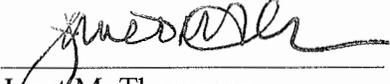
ATTEST:

Taylor W. Burks
Clerk of the County Commission



Daniel K. Atwill
Presiding Commissioner


Fred J. Parry
District I Commissioner


Janet M. Thompson
District II Commissioner

Boone County Purchasing
David Eagle
 Purchasing Assistant



613 E. Ash Street
 Columbia, MO 65201
 Phone: (573) 886-4394

MEMORANDUM

TO: Boone County Commission
 FROM: David Eagle
 RE: Surplus Disposal
 DATE: October 17, 2018

The Purchasing Departments requests permission to dispose of the following list of surplus equipment by auction on GovDeals or by destruction for whatever is not suitable for auction.

	Asset #	Description	Make & Model	Department	Condition of Asset	
1.	NO TAG	8-SHELF FAUX WOOD SHELVING UNIT		COMMISSION	FAIR	
2.	12896	BLUE FABRIC OFFICE CHAIR		CIRCUIT CLERK	RECYCLED WITH ELECTRONICS	REMOVE FROM INVENTORY
3.	NO TAG	MERIDIAN PHONE		PUBLIC ADMINISTRATOR	RECYCLED WITH ELECTRONICS	REMOVE FROM INVENTORY
4.	NO TAG	DESK WITH TWO DRAWERS		MAIL SERVICES	USED/WORN	
5.	NO TAG	DESK WITH FOUR DRAWERS		MAIL SERVICES	USED/WORN	
6.	NO TAG	TWO DRAWER FILE CABINET		MAIL SERVICES	USED/WORN	
7.	NO TAG	WINDOW AC	G.E.	JOINT COMMUNICATIONS	RECYCLED WITH ELECTRONICS	REMOVE FROM INVENTORY

COMMISSION MEMO 10-16-18

8.	NO TAG	WINDOW AC	G.E.	JOINT COMMUNICATIONS	RECYCLED WITH ELECTRONICS	REMOVE FROM INVENTORY
9.	NO TAG	WINDOW AC	G.E.	JOINT COMMUNICATIONS	RECYCLED WITH ELECTRONICS	REMOVE FROM INVENTORY
10.	NO TAG	WINDOW AC	G.E.	JOINT COMMUNICATIONS	RECYCLED WITH ELECTRONICS	REMOVE FROM INVENTORY
11.	NO TAG	FILING FOLDERS		INFORMATION TECHNOLOGY	USED	
12.	NO TAG	FILE HOLDER		INFORMATION TECHNOLOGYT		
13.	NO TAG	MONITOR STAND		INFORMATION TECHNOLOGY	USED	
14.	NO TAG	FIVE SECURITY CAMERAS		FACILITY SECURITY	FUNCTIONAL	
15.	NO TAG	TWO SECURITY CAMERAS		FACILITY SECURITY	FUNCTIONAL/OBSELETE	
16.	NO TAG	DOME SECURITY CAMERA		FACILITY SECURITY	NON-FUNCTIONAL	REMOVE FROM INVENTORY
17.	NO TAG	SECURITY CAMERA		FACILITY SECURITY	NON-FUNCTIONAL	REMOVE FROM INVENTORY
18.	NO TAG	BLACK OFFICE CHAIR		CIRCUIT CLERK	BROKEN	REMOVE FROM INVENTORY
19.	10637	WOOD COMPUTER TABLE ON ROLLERS		CIRCUIT COURT	GOOD	

COMMISSION MEMO 10-16-18

20.	1978	FOUR DRAWER LATERAL FILE CABINET		CIRCUIT COURT	FAIR	
21.	13661	OPEN FILE CABINET WITH FIXED SHELVES (3 SECTIONS)		CIRCUIT CLERK		
22.	11258	BLUE TASK CHAIR		IV-D	RECYCLED WITH ELECTRONICS	REMOVE FROM INVENTORY
23.	10976	BLUE MID-BACK MANAGEMENT CHAIR		PROSECUTING ATTORNEY	RECYCLED WITH ELECTRONICS	REMOVE FROM INVENTORY
24.	NO TAG	BLUE TASK CHAIR		PROSECUTING ATTORNEY	RECYCLED WITH ELECTRONICS	REMOVE FROM INVENTORY
25.	NO TAG	FOUR DRAWER LETTER FILE CABINET	HON	JJC	GOOD	
26.	NO TAG	ROLLING COMPUTER TABLE WITH FOUR OUTLET ELECTRIC CORD		JJC	GOOD	
27.	NO TAG	OFFICE CHAIR	HON	JJC	RECYCLED WITH ELECTRONICS	REMOVE FROM INVENTORY
28.	NO TAG	WASHING MACHINE	WHIRLPOOL	JJC	RECYCLED WITH ELECTRONICS	REMOVE FROM INVENTORY
29.	3764	FIVE DRAWER LEGAL FILE CABINET	BERGER	JJC	GOOD	
30.	1946	FIVE DRAWER LEGAL FILE CABINET	BERGER	JJC	GOOD	
31.	10185	OFFICE CHAIR	HON	JJC	RECYCLED WITH ELECTRONICS	REMOVE FROM INVENTORY

COMMISSION MEMO 10-16-18

32.	10184	OFFICE CHAIR	HON	JJC	RECYCLED WITH ELECTRONICS	REMOVE FROM INVENTORY
33.	10183	OFFICE CHAIR	HON	JJC	RECYCLED WITH ELECTRONICS	REMOVE FROM INVENTORY
34.	16180	CLOTHES DRYER	WHIRLPOOL	JJC	RECYCLED WITH ELECTRONICS	REMOVE FROM INVENTORY
35.	227	FOUR DRAWER LETTER FILE CABINET	ART METAL	JJC	GOOD	
36.	NO TAG	CHAIR		INFORMATION TECHNOLOGY	RECYCLED WITH ELECTRONICS	REMOVE FROM INVENTORY
37.	12666	TELEPHONE SYSTEM	NORTEL-NORSTAR	ROAD & BRIDGE	FAIR	
38.	17023	VIDEO VISITATION SYHSTEM	POLYCOM VSX7000	SHERIFF	GOOD	
39.	17022	LARGE PANEL DISPLAY ENCLOSURE		SHERIFF	GOOD	
40.	4865	STACK CREAM COLORED CHAIR		CIRCUIT COURT	USED	
41.	4875	STACK BROWN COLORED CHAIR		CIRCUIT COURT	USED	
42.	4894	STACK BROWN COLORED CHAIR		CIRCUIT COURT	USED	
43.	4870	STACK CREAM COLORED CHAIR		CIRCUIT COURT	USED	

COMMISSION MEMO 10-16-18

44.	4874	STACK CREAM COLORED CHAIR		CIRCUIT COURT	USED	
45.	4879	STACK CREAM COLORED CHAIR		CIRCUIT COURT	USED	
46.	NO TAG	STACK CREAM COLORED CHAIR		CIRCUIT COURT	USED	
47.	NO TAGS	TWO STACK BROWN COLORED CHAIR		CIRCUIT COURT	USED	
48.	NO TAG	STACK CREAM COLORED CHAIR		CIRCUIT COURT	USED	
49.	NO TAG	TWO SQUARE TABLES		CIRCUIT COURT		
50.	NO TAGS	FOURTEEN STACK CHAIRS		CIRCUIT COURT	FAIR	
51.	NO TAG	VHS TRAINING TAPES		SHERIFF	OUTDATED	
52.	8567	BLUE OFFICE CHAIR		CIRCUIT COURT	RECYCLED WITH ELECTRONICS	REMOVE FROM INVENTORY
53.	16185	LETTER OPENER	NEOPOST	ASSESSOR	RECYCLED WITH ELECTRONICS	REMOVE FROM INVENTORY
53.	NO TAG	SMART PHONE	P6030	JUVENILE OFFICE		
54.	16446	SMART PHONE	PALM TREO	CIRCUIT COURT		

cc: Heather Acton. Auditor's office

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 06/21/18

Fixed Asset Tag Number: no tag

RECEIVED

JUN 25 2018

Description of Asset: 8-shelf faux wood shelving unit

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: fair

Reason for Disposition: no longer need it

Location of Asset and Desired Date for Removal to Storage: Commission office, as soon as convenient

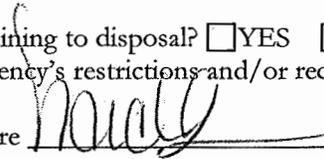
Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1121 Commission

Signature



To be Completed by: AUDITOR

Original Acquisition Date NO Data

G/L Account for Proceeds 1190-3836 NA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

_____ Transfer Department Name _____ Number _____

Location within Department _____

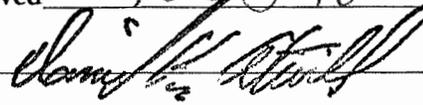
Individual _____

_____ Trade _____ Auction _____ Sealed Bids

_____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature 

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 6/27/18

Fixed Asset Tag Number: 12896

RECEIVED

JUN 28 2018

Description of Asset: Blue Office Chair

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Poor

Reason for Disposition: Broke

Location of Asset and Desired Date for Removal to Storage: 2nd Floor of Circuit Clerk's Office behind 2 South Court R00m

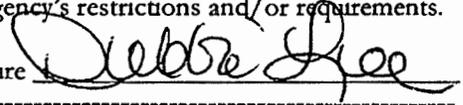
Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1221 Circuit Clerk's Office

Signature



To be Completed by: AUDITOR

Original Acquisition Date 3-23-01

G/L Account for Proceeds 1190-3836 HQ

Original Acquisition Amount \$280.00

Original Funding Source 2731

Account Group 1602

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

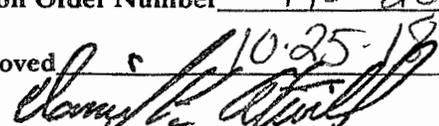
Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature 

BOONE COUNTY
Request for Disposal/Transfer of County Property
Complete, sign, and return to Auditor's Office

Date: 7/13/2018

Fixed Asset Tag Number: No Tag

Description of Asset: Meridian Phone

RECEIVED

JUL 13 2018

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain **BOONE COUNTY AUDITOR**

Other Information (Serial number, etc.):

Condition of Asset: Broken

Reason for Disposition: Doesn't work

Location of Asset and Desired Date for Removal to Storage: Sending in interoffice mail

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1261 - PA Administrator

Signature Bonnie Adams

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 NA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

_____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

_____ Trade _____ Auction _____ Sealed Bids

_____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 06/21/2018

Fixed Asset Tag Number: N/A

RECEIVED

JUN 21 2018

BOONE COUNTY AUDITOR

Description of Asset: Desk with two drawers

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): See Kami Loucks in Mail Services- Room 308

Condition of Asset: Used/Worn

Reason for Disposition: No longer needed or used

Location of Asset and Desired Date for Removal to Storage: Mail Services- Room 308 A.S.A.P

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1194- Mail Services

Signature

Jennifer Riggins

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 HQ

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature *[Signature]*

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 06/21/2018

Fixed Asset Tag Number: N/A

Description of Asset: Desk with four drawers

RECEIVED

JUN 21 2018

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

BOONE COUNTY AUDITOR

Other Information (Serial number, etc.): See Kami Loucks in Mail Services- Room 308

Condition of Asset: Used/Worn

Reason for Disposition: No longer needed or used

Location of Asset and Desired Date for Removal to Storage: Mail Services- Room 308 A.S.A.P

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1194- Mail Services

Signature

Jennifer Riggins

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 HA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

_____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

_____ Trade _____ Auction _____ Sealed Bids

_____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature *[Signature]*

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 06/21/2018

Fixed Asset Tag Number: N/A

RECEIVED

JUN 21 2018

Description of Asset: Two drawer file cabinet

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): See Kami Loucks in Mail Services- Room 308

Condition of Asset: Used/Worn

Reason for Disposition: No longer needed or used

Location of Asset and Desired Date for Removal to Storage: Mail Services- Room 308 A.S.A.P

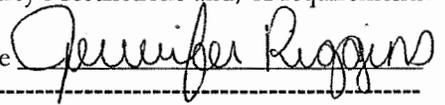
Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1194- Mail Services

Signature



To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 NA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

_____ Transfer Department Name _____ Number _____

Location within Department _____

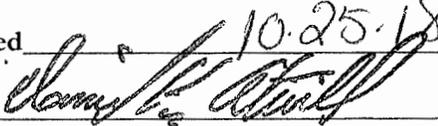
Individual _____

_____ Trade _____ Auction _____ Sealed Bids

_____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10.25.18

Signature 

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

RECEIVED

OCT 05 2018

Date: 9/24/18

Fixed Asset Tag Number: NONE

Description of Asset: G.E. APPLIANCE WINDOW A/C

BOONE COUNTY AUDITOR
INSTALLED AT
CPD WHITE POCE
11/26/15

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): MOD/AJCR120CFW

Condition of Asset: USED/BROKE SER/6F223622

Reason for Disposition: BROKE COMPRESSOR DOES NOT WORK

Location of Asset and Desired Date for Removal to Storage: OUTSIDE BASEMENT DOOR
N/W CORNER OF FC L

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO
If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: RODGER SCALIAK 2704
B.C.S.C.

Signature: [Handwritten Signature]

To be Completed by: AUDITOR
Original Acquisition Date: No Date

G/L Account for Proceeds: 2700-3836 HR

Original Acquisition Amount: _____

Original Funding Source: _____

Account Group: _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number: 475-2018

Date Approved: 10-25-18

Signature: [Handwritten Signature]

RECEIVED OCT 09 2018

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 10/09/2018

Fixed Asset Tag Number: None

RECEIVED

OCT 12 2018

BOONE COUNTY AUDITOR

Description of Asset:

G.E. ROOM AIR CONDITIONER

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): MOD / AJCS12DCBM1

Condition of Asset:

BROKE: COMPRESSOR DOES NOT WORK.

Reason for Disposition:

REMOVED FROM THE ROCKHURST PDD16 SITE.

Location of Asset and Desired Date for Removal to Storage:

OUTSIDE THE N/W BASEMENT DOOR

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name:

RODGER SPINK
BCJL 2704

Signature

[Handwritten Signature]

To be Completed by: AUDITOR

No Data

Original Acquisition Date _____

G/L Account for Proceeds 2700-3836 NA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

_____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

_____ Trade _____ Auction _____ Sealed Bids

_____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10.25.18

Signature [Handwritten Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 07/17/2018

Fixed Asset Tag Number:

REMOVED FROM THE
R100S RADIO SITE
WAS INSTALLED
SEVERAL YEARS AGO

Description of Asset:

G.E. ROOM AIR CONDITIONER

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): MODEL / AICS 12 DCBM 2

Condition of Asset: SERIAL / LM 342909

WELL USED

Reason for Disposition: DOES NOT COOL

Location of Asset and Desired Date for Removal to Storage: OUTSIDE BASEMENT DOOR
AT THE BCJC CENTER

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: Radio Network - 2704

Signature: [Signature]

To be Completed by: AUDITOR

Original Acquisition Date: No Data

G/L Account for Proceeds: N/A RA

Original Acquisition Amount

Original Funding Source

Account Group

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name Number

Location within Department

Individual

Trade Auction Sealed Bids

Other Explain

Commission Order Number 475-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 07/17/18

Fixed Asset Tag Number:

REMOVED FROM THE
HARRISBURG RADIO
SITE.

Description of Asset:

C.E. ROOM AIR CONDITIONER

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): MODEL/AJCS18 DCBM 1

Condition of Asset: WELL USED SERIAL TH 302377

Reason for Disposition: DOES NOT COOL

Location of Asset and Desired Date for Removal to Storage: OUTSIDE THE BASEMENT DOOR
AT THE BCJC CENTER

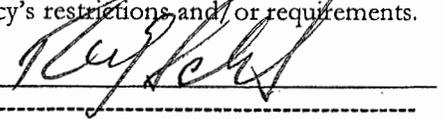
Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: Radio Network - 270A

Signature



To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds N/A NA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature 

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 07/12/2018

Fixed Asset Tag Number: N/A

Description of Asset: Filing Folders

RECEIVED
JUL 13 2018
BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain: Surplus

Other Information (Serial number, etc.):

Condition of Asset: Used

Reason for Disposition: No Longer Needed

Location of Asset and Desired Date for Removal to Storage: A.S.A.P in GC Room 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170- Information Technology

Signature

Jennifer Higgins

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 NA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature *[Signature]*

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 07/13/2018

Fixed Asset Tag Number: N/A

RECEIVED

JUL 13 2018

BOONE COUNTY AUDITOR

Description of Asset: File Holder

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Used/Worn

Reason for Disposition: No Longer Needed

Location of Asset and Desired Date for Removal to Storage: A.S.A.P- GC Room 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170- Information Technology

Signature Jennifer Riggins

To be Completed by: AUDITOR

Original Acquisition Date No Date

G/L Account for Proceeds 1190-3836 NA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY
Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 07/13/2018

Fixed Asset Tag Number: N/A

RECEIVED

Description of Asset: Monitor Stand

JUL 13 2018

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Used/Worn

Reason for Disposition: No Longer Needed

Location of Asset and Desired Date for Removal to Storage: A.S.A.P- GC Room 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170- Information Technology

Signature Jennifer Riggins

To be Completed by: AUDITOR

Original Acquisition Date No Date

G/L Account for Proceeds 1190-3836 NA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 8/16/2018

Fixed Asset Tag Number: No TAG

Description of Asset:

QUANTITY-5- ARECONT AV1355 CAMERAS, 1-AV1355DN,
REMOVED FROM THE COLLECTOR'S OFFICE + EXH ENTRY-

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset:

FUNCTIONAL

Reason for Disposition:

REPLACEMENT

Location of Asset and Desired Date for Removal to Storage:

GOV. CENTER ROOM 123, ANYTIME.

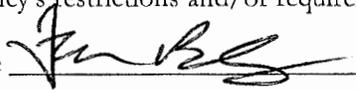
Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: FACILITIES SECURITY 1171

Signature



To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 NA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

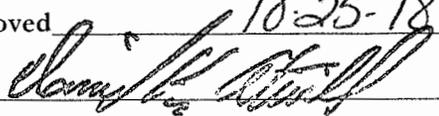
Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature 

RECEIVED

AUG 16 2018

BOONE COUNTY AUDITOR

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

RECEIVED

AUG 16 2018

BOONE COUNTY AUDITOR

Date: 8/14/2018

Fixed Asset Tag Number: NO TAG

Description of Asset: 1 GE- LEGEND ANALOG PTZ CAMERA -
1 GANZ ANALOG CAMERA IN AN EXTERIOR HOUSING

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: FUNCTIONAL - OBSOLETE BY MANUFACTURER (GE LEGEND)
Reason for Disposition: OUTDATED BUT FUNCTIONAL REPLACEMENT

Location of Asset and Desired Date for Removal to Storage: GE, Room 123, Anytime -

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: FACILITIES SECURITY 1171 Signature: [Signature]

To be Completed by: AUDITOR No Data

Original Acquisition Date _____ G/L Account for Proceeds 1190-3836 NA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

RECEIVED

AUG 16 2018

Date: 081618 Fixed Asset Tag Number: NO TAG
Description of Asset: GANZ ZC-D4039 NHA DOME CAMERA BOONE COUNTY AUDITOR
REMOVED FROM THE COURTHOUSE - JUVENILE HOLDING
Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:
Other Information (Serial number, etc.): SERIAL# AH400357
Condition of Asset: FAILED - NO LONGER WORKING.
Reason for Disposition: DUETO FAILURE - REPLACED.
Location of Asset and Desired Date for Removal to Storage: BOV. CTR. ROOM 123 - ANYTIME.
Was asset purchased with grant funding? YES NO
If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO
If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.
Dept Number & Name: FACILITIES SECURITY 1171 Signature: [Signature]

To be Completed by: AUDITOR

Original Acquisition Date No Data G/L Account for Proceeds 1190-3836 NA
Original Acquisition Amount _____
Original Funding Source _____
Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____
Location within Department _____
Individual _____
____ Trade _____ Auction _____ Sealed Bids
____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY
Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 081618

Fixed Asset Tag Number: No TAG

RECEIVED

Description of Asset: GAUZ MODEL ZC-DT4039NHA

AUG 16 2018

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): SERIAL # SHAD0498

Condition of Asset: NON FUNCTIONAL.

Reason for Disposition: REPLACEMENT DUE TO FAILURE

Location of Asset and Desired Date for Removal to Storage: BOO. CENTER Rm 123

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: FACILITIES SECURITY 171 Signature *[Signature]*

To be Completed by: AUDITOR No Data

Original Acquisition Date _____ G/L Account for Proceeds 1190-3836 NA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

_____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

_____ Trade _____ Auction _____ Sealed Bids

_____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature *[Signature]*

BOONE COUNTY
Request for Disposal/Transfer of County Property
Complete, sign, and return to Auditor's Office

Date: 8/30/18

Fixed Asset Tag Number: NA

Description of Asset: BLACK OFFICE CHAIR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): NA

Condition of Asset: BROKE/POOR

Reason for Disposition: BROKE

Location of Asset and Desired Date for Removal to Storage: IN DEBBIE LEE'S OFFICE ON THE 2ND FOOR

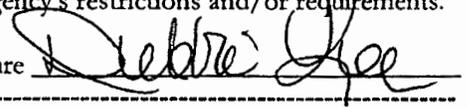
Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1221 CIRCUIT CLERK'S OFFICE

Signature



To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-38364R

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

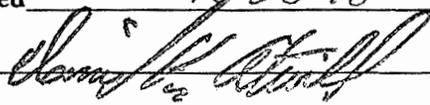
Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature 

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 8/24/18

Fixed Asset Tag Number: 10637

Description of Asset: Wood Computer table on rollers, 27 1/2" W X 24"D X 32" Tall

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Good

Reason for Disposition: No longer using table.

Location of Asset and Desired Date for Removal to Storage: 1st Floor of courthouse in the IT Department

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: Circuit Court 1210

Signature Mary Epp

To be Completed by: AUDITOR

Original Acquisition Date 5-23-96 G/L Account for Proceeds 1190-3836

Original Acquisition Amount \$110.00

Original Funding Source 2731

Account Group 1602

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature [Signature]

RECEIVED
JUL 27 2018
BOONE COUNTY AUDITOR

BOONE COUNTY
Request for Disposal/Transfer of County Property
Complete, sign, and return to Auditor's Office

Date: 08/07/18

Fixed Asset Tag Number: 1978

AUG - 8 2018

Description of Asset: 4 Drawer Lateral File Cabinet

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain: Surplus

Other Information (Serial number, etc.):

Condition of Asset: Good

Reason for Disposition: No longer used or needed

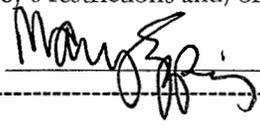
Location of Asset and Desired Date for Removal to Storage: Located in Shipping and Receiving

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1210 Circuit Court

Signature 

To be Completed by: AUDITOR

Original Acquisition Date 11-15-1983

G/L Account for Proceeds 1190-3836 HQ

Original Acquisition Amount \$150.00

Original Funding Source 2731

Account Group 1602

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

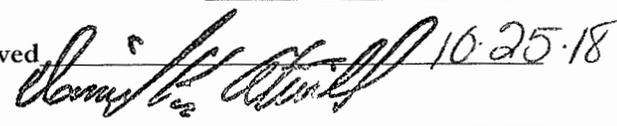
Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature 

RECEIVED

AUG 09 2018

BOONE COUNTY AUDITOR

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 8/27/18

Fixed Asset Tag Number: 13661

RECEIVED

JUL 27 2018

Description of Asset: Open File Cabinet with Fixed Shelves (3 Sections)

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Good

Reason for Disposition: No longer needed for files

Location of Asset and Desired Date for Removal to Storage: Located in old Micro Filming room in the Family Court area back by Carol Rumble. Remove when you are able.

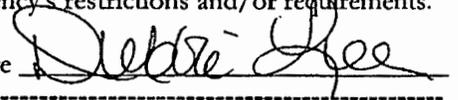
Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1221 Circuit Clerk's Office

Signature



To be Completed by: AUDITOR

Original Acquisition Date 11-15-83

G/L Account for Proceeds 1190-3836 NA

Original Acquisition Amount \$1,079.91

Original Funding Source 2731

Account Group 1602

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature 

BOONE COUNTY
Request for Disposal/Transfer of County Property
Complete, sign, and return to Auditor's Office

Date: 07/19/18

Fixed Asset Tag Number: 11258

RECEIVED

JUL 18 2018

Description of Asset: Task Chair Blue

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): Hon

Condition of Asset: Old - Purchased in 1997

Reason for Disposition:

Location of Asset and Desired Date for Removal to Storage: Back Hallway by PA Office Conference Rom

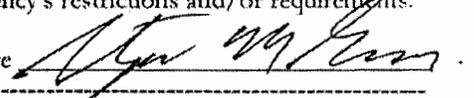
Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1263 IVD

Signature



To be Completed by: AUDITOR *Already Retired*

Original Acquisition Date _____ *in system* G/L Account for Proceeds 1190-3836 *HA*

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

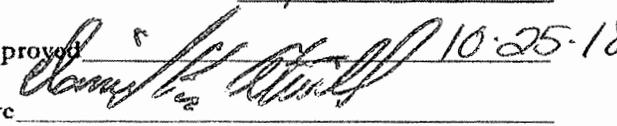
Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature 

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 07/18/18

Fixed Asset Tag Number: 10976

RECEIVED

Description of Asset: Mid-Back Management Chair - Blue

JUL 18 2018

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain

BOONE COUNTY AUDITOR

Other Information (Serial number, etc.): Piretti Model 2000

Condition of Asset: Old.

Reason for Disposition: Broken - Won't lock into position

Location of Asset and Desired Date for Removal to Storage: Prosecuting Attorney -Bonnie's Office

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1261 Prosecuting Attorney

Signature

Bonnie Cole

To be Completed by: AUDITOR

Original Acquisition Date 4-9-07

G/L Account for Proceeds 1190-3836 46

Original Acquisition Amount \$343.20

Original Funding Source 2731

Account Group 1602

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature *[Signature]*

BOONE COUNTY
Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

RECEIVED

JUL 18 2018

BOONE COUNTY AUDITOR

Date: 07/18/18

Fixed Asset Tag Number: No Tag

Description of Asset: Blue Task Chair

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): Old - Won't stay up.

Condition of Asset: Old.

Reason for Disposition: Won't go up and down

Location of Asset and Desired Date for Removal to Storage: Prosecuting Attorney -Bonnie's Office

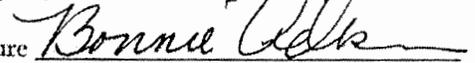
Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1261 Prosecuting Attorney

Signature



To be Completed by: AUDITOR NO Data

Original Acquisition Date _____

G/L Account for Proceeds 1190-3836 HA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

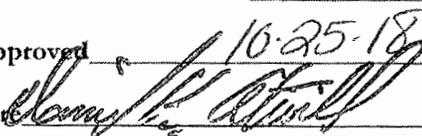
Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature 

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 9/6/2018

Fixed Asset Tag Number: No Tag

RECEIVED

Description of Asset: Hon 4 Drawer Letter File Cabinet

SEP 07 2018

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain **BOONE COUNTY AUDITOR**

Other Information (Serial number, etc.):

Condition of Asset: Good

Reason for Disposition: JJC does not use anymore

Location of Asset and Desired Date for Removal to Storage: ASAP

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1242 - JJC

Signature *Dana Epp*

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3826 HA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature *Dana Epp*

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 9/6/2018

Fixed Asset Tag Number: No Tags

Description of Asset: Bretford Rolling Computer Table with 4 Outlet Electric Cord
(2)

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

RECEIVED

Other Information (Serial number, etc.):

SEP 07 2018

Condition of Asset: Good

BOONE COUNTY AUDITOR

Reason for Disposition: JJC does not use anymore

Location of Asset and Desired Date for Removal to Storage: ASAP

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1242 - JJC

Signature



To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 HA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

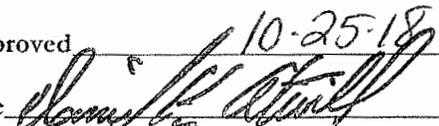
Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature 

BOONE COUNTY
Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 9/6/2018

Fixed Asset Tag Number: No Tag

RECEIVED

SEP 07 2018

Description of Asset: Hon Office Chair

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: poor - torn seat

Reason for Disposition: Not Usable - Costly to Fix

Location of Asset and Desired Date for Removal to Storage: ASAP

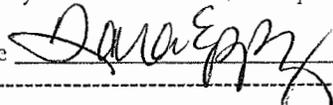
Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1242 - JJC

Signature



To be Completed by: AUDITOR

Original Acquisition Date No Data G/L Account for Proceeds 1190-3836 HA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

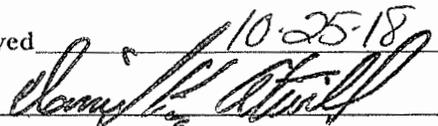
Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature 

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 9/6/2018

Fixed Asset Tag Number: No Tag

Description of Asset: Whirlpool Washer

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: bad water pump / circuit board questionable

Reason for Disposition: Not Usable - Costly to Fix

Location of Asset and Desired Date for Removal to Storage: ASAP

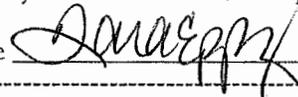
Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1242 - JJC

Signature



To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 HA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature 

RECEIVED

SEP 07 2018

BOONE COUNTY AUDITOR

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

RECEIVED

Date: 9/6/2018

Fixed Asset Tag Number: 3764

SEP 07 2018

Description of Asset: Berger 5 Drawer Legal File Cabinet

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Good

Reason for Disposition: JJC does not use anymore

Location of Asset and Desired Date for Removal to Storage: ASAP

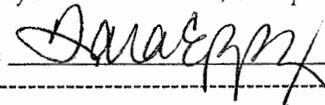
Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1242 - JJC

Signature



To be Completed by: AUDITOR

Original Acquisition Date 11-21-1983

G/L Account for Proceeds 1190-3836 HA

Original Acquisition Amount \$200.00

Original Funding Source 2731

Account Group 1602

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 475-2018

Date Approved 10.25.18

Signature 

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 9/6/2018

Fixed Asset Tag Number: 1946

RECEIVED

Description of Asset: Berley 5 Drawer Legal File Cabinet

SEP 07 2018

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

BOONE COUNTY AUDITOR

Other Information (Serial number, etc.):

Condition of Asset: Good

Reason for Disposition: JJC does not use anymore

Location of Asset and Desired Date for Removal to Storage: ASAP

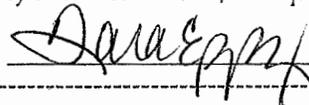
Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1242 - JJC

Signature



To be Completed by: AUDITOR

Original Acquisition Date 11-15-1983

G/L Account for Proceeds 1190-3836 HR

Original Acquisition Amount \$100.00

Original Funding Source 2731

Account Group 1602

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature 

BOONE COUNTY
Request for Disposal/Transfer of County Property
Complete, sign, and return to Auditor's Office

Date: 9/6/2018

Fixed Asset Tag Number: 10185

Description of Asset: Hon Office Chair

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: poor - torn seat

Reason for Disposition: Not Usable - Costly to Fix

Location of Asset and Desired Date for Removal to Storage: ASAP

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1242 - JJC

Signature



To be Completed by: AUDITOR

Original Acquisition Date 3-27-95

G/L Account for Proceeds 1190-3836 110

Original Acquisition Amount \$196.90

Original Funding Source 2782

Account Group 1602

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature 

RECEIVED

SEP 07 2018

BOONE COUNTY AUDITOR

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 9/6/2018

Fixed Asset Tag Number: 10184

RECEIVED

Description of Asset: Hon Office Chair

SEP 07 2018

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

BOONE COUNTY AUDITOR

Other Information (Serial number, etc.):

Condition of Asset: poor - torn seat

Reason for Disposition: Not Usable - Costly to Fix

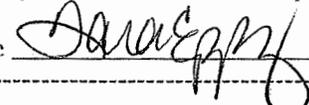
Location of Asset and Desired Date for Removal to Storage: ASAP

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1242 - JJC

Signature 

To be Completed by: AUDITOR

Original Acquisition Date 3-27-1995

G/L Account for Proceeds 1190-3836 HA

Original Acquisition Amount \$196.90

Original Funding Source 2782

Account Group 1602

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

___ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

___ Trade ___ Auction ___ Sealed Bids

___ Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature 

BOONE COUNTY
Request for Disposal/Transfer of County Property
Complete, sign, and return to Auditor's Office

Date: 9/6/2018

Fixed Asset Tag Number: 10183

RECEIVED

Description of Asset: Hon Office Chair

SEP 07 2018

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: poor - torn seat

Reason for Disposition: Not Usable - Costly to Fix

Location of Asset and Desired Date for Removal to Storage: ASAP

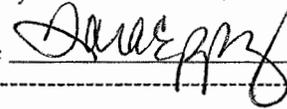
Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1242 - JJC

Signature



To be Completed by: AUDITOR

Original Acquisition Date 3-27-1995

G/L Account for Proceeds 1190-3836 NA

Original Acquisition Amount \$196.90

Original Funding Source 2782

Account Group 1602

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature 

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 9/6/2018

Fixed Asset Tag Number: 16180

RECEIVED

SEP 07 2018

Description of Asset: Whirlpool Dryer

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: ~~parted out / bad control board~~

Reason for Disposition: Not Usable - Costly to Fix

Location of Asset and Desired Date for Removal to Storage: ASAP

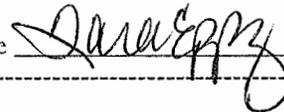
Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1242 - JJC

Signature



To be Completed by: AUDITOR

Original Acquisition Date 2-16-07

G/L Account for Proceeds 1190-3836 NO

Original Acquisition Amount \$753.75

Original Funding Source 2731

Account Group 1604

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

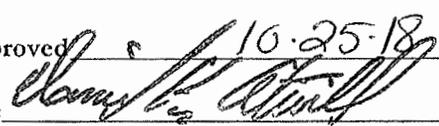
Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature 

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

RECEIVED

Date: 9/6/2018

Fixed Asset Tag Number: 0227

SEP 07 2018

Description of Asset: Art Metal Four (4) Drawer Letter File Cabinet

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Good

Reason for Disposition: JJC does not use anymore

Location of Asset and Desired Date for Removal to Storage: ASAP

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1242 - JJC

Signature

To be Completed by: AUDITOR

Original Acquisition Date 12-1-1983

G/L Account for Proceeds 1190-3836 NA

Original Acquisition Amount \$400.00

Original Funding Source 2731

Account Group 1602

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name Number

Location within Department

Individual

Trade Auction Sealed Bids

Other Explain

Commission Order Number 475-2018

Date Approved 10-25-18

Signature

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

RECEIVED

Date: 09/20/18

Fixed Asset Tag Number: N/A

SEP 20 2018

Description of Asset: Chair

BOONE COUNTY
AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Used/Worn

Reason for Disposition: No longer needed or used

Location of Asset and Desired Date for Removal to Storage: GC- Room 123 A.S.A.P

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1170- Information Technology

Signature Jennifer Riggins

To be Completed by: AUDITOR No Data

Original Acquisition Date _____

G/L Account for Proceeds 1190-3836 NA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10.25.18

Signature [Signature]

CAPITAL

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 10/04/2018 Fixed Asset Tag Number: 12666

Description of Asset: Nortel-Norstar Telephone System

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): See attached.

Condition of Asset: Fair - was still functioning when taken out of service

Reason for Disposition: Replace with new phone system

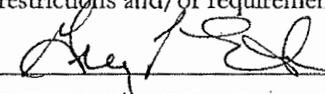
Location of Asset and Desired Date for Removal to Storage: As soon as possible.

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 2040 Road & Bridge

Signature 

RECEIVED

OCT 04 2018

BOONE COUNTY AUDITOR

To be Completed by: AUDITOR

Original Acquisition Date 11-16-2000

G/L Account for Proceeds 2045-3835 NA

Original Acquisition Amount \$19,803.25

Original Funding Source 2741

Account Group 1604

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

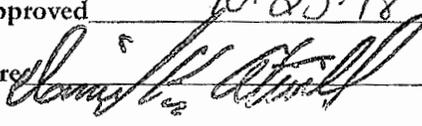
Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 475-2018

Date Approved 10.25.18

Signature 

Nortel - Norstar Telephone System

FA # 12666

	Model Number	Quantity	Notes:
CONTROLLER			
	NNTM8455EW0L	1	
	NNTM8455D508	1	
	NNTM84550A4A	1	
HANDSETS			
	NT8B41FA-03	4	48 button "side car"
	NT8B40AE-03	4	
	NT8B14AD-03	10	
	NT8B30AE-03	5	
	NT8B20AF-03	1	

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

RECEIVED

Date: 10-8-18

Fixed Asset Tag Number: 17023

OCT 09 2018

Description of Asset: PolycomVSX7000 video visitation system

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): 8208520AE00EAK

Condition of Asset: Good

Reason for Disposition: No longer needed-MUPC replaced equipment

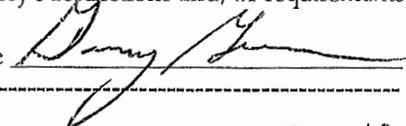
Location of Asset and Desired Date for Removal to Storage: BCSD Admin Bldg

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 2901 Sheriff

Signature 

To be Completed by: AUDITOR

Original Acquisition Date 6-1-09

G/L Account for Proceeds 290-3835 712

Original Acquisition Amount \$5,748.22

Original Funding Source 2787

Account Group 1604

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature 

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

RECEIVED

Date: 10-8-18

Fixed Asset Tag Number: 17022

OCT 09 2018

Description of Asset: Large Panel Display Enclosure

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): Model WS-3050

Condition of Asset: Very good

Reason for Disposition: No longer needed

Location of Asset and Desired Date for Removal to Storage: BCSD Admin Bldg-formerly at MUPC

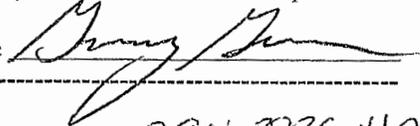
Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 2901 Sheriff

Signature



To be Completed by: AUDITOR

Original Acquisition Date 6-5-09

G/L Account for Proceeds 2901-3836 HQ

Original Acquisition Amount \$1,999.00

Original Funding Source 2787

Account Group 1602

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature 

BOONE COUNTY
Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 10/03/18

Fixed Asset Tag Number: 04865

RECEIVED

Description of Asset: Cream Chair

OCT 03 2018

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain.

BOONE COUNTY AUDITOR

Other Information (Serial number, etc.):

Condition of Asset: Worn and dirty

Reason for Disposition: No longer needed and not usable anywhere else

Location of Asset and Desired Date for Removal to Storage: Hearing room East of Ceremonial Courtroom, ASAP

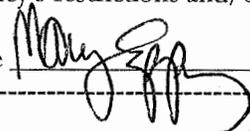
Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: Circuit Court
Unknown, probably 1210 or 1230

Signature



To be Completed by: AUDITOR

Original Acquisition Date 9/4/85

G/L Account for Proceeds 1190-3836 HOA

Original Acquisition Amount \$53.00

Original Funding Source 2731

Account Group 1602

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

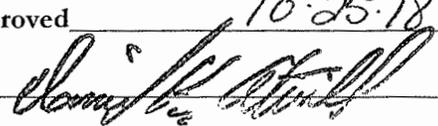
Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature 

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 10/03/18

Fixed Asset Tag Number: 04875

Description of Asset: Taupe/Brown Chair

RECEIVED

OCT 03 2018

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

BOONE COUNTY AUDITOR

Other Information (Serial number, etc.):

Condition of Asset: Worn and dirty

Reason for Disposition: No longer needed and not usable anywhere else

Location of Asset and Desired Date for Removal to Storage: Hearing room East of Ceremonial Courtroom, ASAP

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: Circuit Court
Unknown, probably 1210 or 1230

Signature Mary Egan

To be Completed by: AUDITOR

Original Acquisition Date 9-4-85

G/L Account for Proceeds 1190-3836 HA

Original Acquisition Amount \$53.00

Original Funding Source 2731

Account Group 1602

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 10/03/18

Fixed Asset Tag Number: 04894

RECEIVED

Description of Asset: Taupe/Brown Chair

OCT 03 2018

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain: BOONE COUNTY AUDITOR

Other Information (Serial number, etc.):

Condition of Asset: Worn and dirty

Reason for Disposition: No longer needed and not usable anywhere else

Location of Asset and Desired Date for Removal to Storage: Hearing room East of Ceremonial Courtroom, ASAP

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: Circuit Court Unknown, probably 1210 or 1230

Signature May Eppig

To be Completed by: AUDITOR

Original Acquisition Date 9-4-1985

G/L Account for Proceeds 1190-3836 NA

Original Acquisition Amount \$53.00

Original Funding Source 2731

Account Group 1602

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 10/03/18

Fixed Asset Tag Number: 04870

RECEIVED

Description of Asset: Cream Chair

OCT 03 2018

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

BOONE COUNTY AUDITOR

Other Information (Serial number, etc.):

Condition of Asset: Worn and dirty

Reason for Disposition: No longer needed and not usable anywhere else

Location of Asset and Desired Date for Removal to Storage: Hearing room East of Ceremonial Courtroom, ASAP

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: Circuit Court
Unknown, probably 1210 or 1230

Signature *Mary [Signature]*

To be Completed by: AUDITOR Already Retired

Original Acquisition Date In System G/L Account for Proceeds 1190-3836 HA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature *[Signature]*

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 10/03/18

Fixed Asset Tag Number: 04874

RECEIVED

Description of Asset: Cream Chair

OCT 03 2018

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain: BOONE COUNTY AUDITOR

Other Information (Serial number, etc.):

Condition of Asset: Worn and dirty

Reason for Disposition: No longer needed and not usable anywhere else

Location of Asset and Desired Date for Removal to Storage: Hearing room East of Ceremonial Courtroom, ASAP

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: Circuit Court Unknown, probably 1210 or 1230

Signature *May [unclear]*

To be Completed by: AUDITOR Already Retired

Original Acquisition Date in System G/L Account for Proceeds 190-3836 HA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10.25.18

Signature *Samuel [unclear]*

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 10/03/18

Fixed Asset Tag Number: 04879

Description of Asset: Cream Chair

RECEIVED

OCT 03 2018

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

BOONE COUNTY AUDITOR

Other Information (Serial number, etc.):

Condition of Asset: Worn and dirty

Reason for Disposition: No longer needed and not usable anywhere else

Location of Asset and Desired Date for Removal to Storage: Hearing room East of Ceremonial Courtroom, ASAP

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: Unknown, probably 1210 or 1230

Signature

Mary Egan

To be Completed by: AUDITOR *Already Retired*

Original Acquisition Date *Circuit Court* *in System*

G/L Account for Proceeds *1190-3836 HA*

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number *475-2018*

Date Approved *10.25.18*

Signature *[Signature]*

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 10/03/18

Fixed Asset Tag Number: No tage, completely scratched off

Description of Asset: Cream Chair

RECEIVED

OCT 03 2018

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

BOONE COUNTY AUDITOR

Other Information (Serial number, etc.):

Condition of Asset: Worn and dirty

Reason for Disposition: No longer needed and not usable anywhere else

Location of Asset and Desired Date for Removal to Storage: Hearing room East of Ceremonial Courtroom, ASAP

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: Circuit Court Unknown, probably 1210 or 1230

Signature Mary Eppins

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 HEL

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10.25.18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 10/03/18

Fixed Asset Tag Number: No ID Tags, completely scratched off

Description of Asset: 2 Taupe/Brown Chairs

RECEIVED

OCT 03 2018

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

BOONE COUNTY AUDITOR

Other Information (Serial number, etc.):

Condition of Asset: Worn and dirty

Reason for Disposition: No longer needed and not usable anywhere else

Location of Asset and Desired Date for Removal to Storage: Hearing room East of Ceremonial Courtroom, ASAP

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: Circuit Court
Unknown, probably 1210 or 1230

Signature Mary Egan

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 HEA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10-25-18

Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 10/03/18

Fixed Asset Tag Number: 048?? (2 Numbers scratched off)

Description of Asset: Cream Chair

RECEIVED

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

OCT 03 2018

Other Information (Serial number, etc.):

BOONE COUNTY AUDITOR

Condition of Asset: Worn and dirty

Reason for Disposition: No longer needed and not usable anywhere else

Location of Asset and Desired Date for Removal to Storage: Hearing room East of Ceremonial Courtroom, ASAP

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: Unknown, probably 1210 or 1230

Signature

Mary Egan

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 RA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10.25.18

Signature *[Signature]*

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

RECEIVED

OCT 03 2018

BOONE COUNTY AUDITOR

Date: 10/2/18

Fixed Asset Tag Number: *could not find any*

Description of Asset: 2 square tables

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain: Someone else might want them, they're in OK shape.

Other Information (Serial number, etc.): no tags

Condition of Asset: Good

Reason for Disposition: No longer needed and not usable anywhere else

Location of Asset and Desired Date for Removal to Storage: Break room, ASAP

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements per YES NO
If yes, attach documentation demonstrating compliance with the requirements.

Dept Number & Name: Unknown, probably 1210 or 1230

Signature *Mary Epping*

These have a sign saying "Surplus" on them

To be Completed by: AUDITOR

Original Acquisition Date *No Data*

G/L Account for Proceeds *1190-3836 HA*

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number *475-2018*

Date Approved *10.25.18*

Signature *[Signature]*

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

RECEIVED

OCT 03 2018

BOONE COUNTY AUDITOR

Date: 10/2/18

Fixed Asset Tag Number: None (old jury chairs)

Description of Asset: ¹⁴ 16 Chairs in break room

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): 18 salmon colored chairs, plus 1 green plastic chair

Condition of Asset: Worn and dirty

Reason for Disposition: No longer needed and not usable anywhere else.

Location of Asset and Desired Date for Removal to Storage: Break room, west of Ceremonial Courtroom, ASAP

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: Unknown, probaby 1210 or 1230

Signature

Mary Spic

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 HQ

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10.25.18

Signature *[Signature]*

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 10 12 2018

Fixed Asset Tag Number: none

Description of Asset: Approximately 35 VHS tapes of outdated training (Command and Control) plus 3 large associated binders

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.): none

Condition of Asset: good

Reason for Disposition: outdated content for our operation

Location of Asset and Desired Date for Removal to Storage: As soon as possible - outside Jail Admin office

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: ¹²⁵¹BCSD Capt. Jenny Atwell

Signature Jenny Atwell #154

To be Completed by: AUDITOR

Original Acquisition Date No Data

G/L Account for Proceeds 1190-3836 NA

Original Acquisition Amount _____

Original Funding Source _____

Account Group _____

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

_____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

_____ Trade _____ Auction _____ Sealed Bids

_____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10.25.18

Signature Jenny Atwell

C:\Users\jatwell\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.Outlook\QBFCFL6H\Request for Disposal.docx

Revised: September 2016

RECEIVED

OCT 12 2018

BOONE COUNTY AUDITOR

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

RECEIVED

Date: 9/12/2018

Fixed Asset Tag Number: 8567

SEP 13 2018

Description of Asset: Office Chair, *Blue fabric w/arms*

BOONE COUNTY AUDITOR

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: Poor

Reason for Disposition: Seat broken unsafe for use

Location of Asset and Desired Date for Removal to Storage: Shipping and Receiving

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: *Circuit #1210*

Signature



To be Completed by: AUDITOR

Original Acquisition Date 1-28-92

G/L Account for Proceeds 1190-3836 NA

Original Acquisition Amount \$254.00

Original Funding Source 2782

Account Group 1602

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 475-2018

Date Approved 10.25.18

Signature 

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 10-9-18

Fixed Asset Tag Number: 16185

Description of Asset: Neopost + letter opener, desk top

RECEIVED

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

OCT 09 2018

Other Information (Serial number, etc.): Equip id A2522

BOONE COUNTY AUDITOR

Condition of Asset: poor, has been worked on to no avail.

Reason for Disposition: Doesn't work properly

Location of Asset and Desired Date for Removal to Storage: ASAP - in Assessor's Ofc.

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 2010/Assessor

Signature

To be Completed by: AUDITOR

Original Acquisition Date 2-16-07

G/L Account for Proceeds 2010-3836 NA

Original Acquisition Amount \$1,775.00

Original Funding Source 2743

Account Group 1604

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

____ Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

____ Trade _____ Auction _____ Sealed Bids

____ Other Explain _____

Commission Order Number 475-2018

Date Approved 10.25.18

Signature *[Signature]*

BOONE COUNTY
Request for Disposal/Transfer of County Property
Complete, sign, and return to Auditor's Office

Date: 06/08/2018 Fixed Asset Tag Number: <none>
Description of Asset: SmartPhone / P6030
Requested Means of Disposal: Recycle/Trash
Other Information: SERIAL NUMBER: 13100036858
Condition of Asset: OUTDATED
Reason for Disposition: ROUTINE REPLACEMENT
Location of Asset and Desired Date for Removal To Storage: Boone County Courthouse / Floor: 1 / Room: Technology Services - IMMEDIATELY

RECEIVED
JUN 12 2018
BOONE COUNTY AUDITOR

Was Asset Purchased with Grant Funding? NO

DEPARTMENT: 1241-Juvenile Office SIGNATURE: Mary Eppin

To be Completed by: AUDITOR
Original Acquisition Date No Data G/L Acct for Proceeds 1190-3836 ~~1190~~
Original Acquisition Amount _____
Original Funding Source _____
Account Group _____

To be Completed by : COUNTY COMMISSION / COUNTY CLERK
Approved Disposal Method;
_____ Transfer Department Name: _____ Number _____
Location within Department: _____
Individual: _____
_____ Trade _____ Auction _____ Sealed Bids
_____ Other Explain _____

Commission Order Number 475-2018
Date Approve: 10-25-18
Signature [Signature]

BOONE COUNTY

Request for Disposal/Transfer of County Property

Complete, sign, and return to Auditor's Office

Date: 6/8/2018 Fixed Asset Tag Number: 164 46
Description of Asset: SMART PHONE - PALM TREO

Requested Means of Disposal: Sell Trade-In Recycle/Trash Other, Explain:

Other Information (Serial number, etc.):

Condition of Asset: POOR

Reason for Disposition: OUT DATED

Location of Asset and Desired Date for Removal to Storage: IMMEDIATELY | COURT TECHNOLOGY SERVICES

Was asset purchased with grant funding? YES NO

If "YES", does the grant impose restriction and/or requirements pertaining to disposal? YES NO

If yes, attach documentation demonstrating compliance with the agency's restrictions and/or requirements.

Dept Number & Name: 1210-CIRCUIT CART Signature: Mary Eppis

To be Completed by: AUDITOR

Original Acquisition Date 3-4-08

G/L Account for Proceeds 1190-3836 NA

Original Acquisition Amount \$1.00

Original Funding Source 2731

Account Group 1604

To be Completed by: COUNTY COMMISSION / COUNTY CLERK

Approved Disposal Method:

Transfer Department Name _____ Number _____

Location within Department _____

Individual _____

Trade Auction Sealed Bids

Other Explain _____

Commission Order Number 475-2018

Date Approved 10.25.18

Signature [Signature]

RECEIVED

JUN 12 2018

BOONE COUNTY AUDITOR