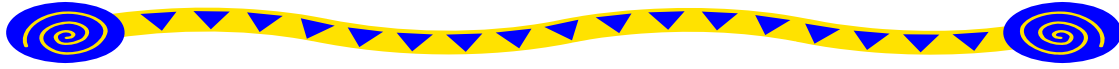


SURPLUS PROPERTY



Please fill in the information below for each of your inventory items.

Inventory#: _____ Digital Picture#: _____

Type of Item: _____

Make: _____ Model: _____ Year: _____

Mileage/Hours: _____ VIN#: _____

Engine Size: _____ Transmission Type: _____

Running Condition: Runs Well Runs Doesn't Run Unknown

Gas Type: Unleaded Propane Diesel Other: _____

Description: _____

Why is this item going into surplus?: _____

Department: _____

Department Head Signature: _____

Approved Property Committee: _____

Property Committee Chairman

Date