



City of Madison, Alabama

Capital Assets Disposal Form

Section 1

Capital Assets Tag No. _____
(Existing Assets Number)

Section 2

Date: 02/20/2025 Department: Police

Item Description: Surefire (Damaged)

Serial/Model #: D02297 New: Used:

Location: Special Ops - SWAT Vendor Name: _____

Asset Class: _____ Activity Code: _____ Fund: _____ Acct. No.: _____

Date Item Acquired: _____ Cost or Donated Value: _____

Enhancements: _____

The original form must be submitted to the City Clerk-Treasurer's Department for the disposition of assets. Items requested for disposition will be submitted to the City Council for approval. The City Clerk-Treasurer will notify the department head of the disposition method and submit a copy of approved disposition to the Finance Department.

[Signature] 02/20/2025
Signature: (Department Head or Designee) Date:

***** TO BE COMPLETED BY CITY CLERK *****

(Below this line)

Section 3

DISPOSITION METHOD: Surplus Sale: _____ Other: _____

APPROVAL OF DISPOSITION METHOD:

Approved by Resolution #: _____ Date: _____

Minutes #: _____

SOLD TO: _____ Proceeds: _____

Address: _____

_____ Date: _____

Signature, City Clerk-Treasurer Date

COMMENTS: _____

COPY: Requesting Dept. Finance Dept.



City of Madison, Alabama

Capital Assets Disposal Form

Section 1

Capital Assets Tag No. _____
(Existing Assets Number)

Section 2

Date: 02/20/2025 Department: Police

Item Description: Remington 870

Serial/Model #: A308938M New: Used:

Location: Special Ops - Armory Vendor Name: _____

Asset Class: _____ Activity Code: _____ Fund: _____ Acct. No.: _____

Date Item Acquired: _____ Cost or Donated Value: _____

Enhancements: _____

The original form must be submitted to the City Clerk-Treasurer's Department for the disposition of assets. Items requested for disposition will be submitted to the City Council for approval. The City Clerk-Treasurer will notify the department head of the disposition method and submit a copy of approved disposition to the Finance Department.

John J. Hand 02/20/2025
 Signature: (Department Head or Designee) Date:

***** TO BE COMPLETED BY CITY CLERK *****

(Below this line)

Section 3

DISPOSITION METHOD: Surplus Sale: _____ Other: _____

APPROVAL OF DISPOSITION METHOD:

Approved by Resolution #: _____ Date: _____

Minutes #: _____

SOLD TO: _____ Proceeds: _____
 Address: _____

 _____ Date: _____

 Signature, City Clerk-Treasurer Date

COMMENTS: _____

COPY: Requesting Dept. Finance Dept.