

City of Madison, Alabama

Capital Assets

Disposal Form

Section 1		Capital Assets	s Tag No.	05000
· ·				(Existing Assets Number)
Section 2 Date: 06/26/2023		Department:	Police	
Item Description:	Scan Snap Color Imag	ing Scanner		
Serial/Model #:	Serial # 029561/Model # S500		New: Used:	
Location: Speci	ial Ops	Vendor Name:		
Asset Class:	Activity Code:	Fund:	Acct. No.	
Date Item Acquired:		Cost or Donate	ed Value:	
Enhancements:	100000000			
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: (Departmen	It Head or Designee)			Date:
******** TO BE COMPLETED BY CITY CLERK ************************************				
Section 3 DISPOSITION METHO	D: Surplus S	ale:	Other:	
APPROVAL OF DISPOSITION METHOD:				
Approved by Resolution		Date:		
Minutes #:				
SOLD TO: Address:		Proceeds:		
			Date:	
Signature, City Clerk-Treasurer			•	Date
COMMENTS:				
COPY: Requesting D	ept.	Finar	nce Dept.	Revised 6/25/2007