



City of Madison, Alabama

Capital Assets Disposal Form

Section 1

Capital Assets Tag No. 01290
(Existing Assets Number)

Section 2

Date: 10/17/2023 Department: Finance
 Item Description: Guest Chair
 Serial/Model #: _____ New: Used:
 Location: Finance Vendor Name: _____
 Asset Class: _____ Activity Code: _____ Fund: _____ Acct. No.: _____
 Date Item Acquired: Unknown 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.

Rogin D. Bellom 10/17/2023
 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: 10/17/2023

Department: Finance

Item Description: 2 Shelf Bookcase

Serial/Model #: _____ New: Used:

Location: Finance Vendor Name: _____

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

Date Item Acquired: Unknown 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.

Rogw D. Bellomy
Signature: (Department Head or Designee)

10/17/2023
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: 10/17/2023

Department: Finance

Item Description: 3 Shelf Bookcases (2)

Serial/Model #: _____ New: Used:

Location: Finance Vendor Name: _____

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

Date Item Acquired: Unknown Cost or Donated Value: _____

Enhancements: _____

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Roger D. Ballomy
Signature: (Department Head or Designee)

10/17/2023
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.

Fillable Form



City of Madison, Alabama

Capital Assets Disposal Form

Section 1

Capital Assets Tag No. 000060 & 01844
(Existing Assets Number)

Section 2

Date: 10/17/2023

Department: Finance

Item Description: 4 Drawer File Cabinets (2)

Serial/Model #: _____

New: Used:

Location: Finance

Vendor Name: _____

Asset Class: _____

Activity Code: _____

Fund: _____

Acct. No.: _____

Date Item Acquired: _____

Unknown

Cost or Donated Value: _____

Enhancements: _____

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Roger D. Bellomy
Signature: (Department Head or Designee)

10/17/2023
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.

Revised 6/25/2007

Submit Form



City of Madison, Alabama

Capital Assets Disposal Form

Section 1

Capital Assets Tag No. 000093
(Existing Assets Number)

Section 2

Date: 10/17/2023

Department: Finance

Item Description: Typewriter

Serial/Model #: _____ New: Used:

Location: Finance Vendor Name: Nakajima

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

Date Item Acquired: Unknown Cost or Donated Value: _____

Enhancements: _____

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Rogw D. Bellomy
Signature: (Department Head or Designee)

10/17/2023
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.