



ANITA LOPEZ LUCAS COUNTY AUDITOR

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CAPITAL ASSET DISPOSAL AND TRANSFER FORM TO BE COMPLETED BY DEPARTMENT - PLEASE FILL IN ALL LINES

FOR DISPOSAL

Fund-Department disposing asset _____

Description of asset _____

Manufacturer's serial # _____ County inventory # _____

Month/Year asset was disposed of: _____

How has the asset been disposed of: County Auction Scrapped Other

If *Other* (explain) _____

***** PLEASE ATTACH DOCUMENTARY EVIDENCE FOR DISPOSALS AND TRANSFERS *****

FOR TRANSFERS

Fund-Department transferring asset _____

Fund-Department receiving asset _____

Description of asset _____

New location of asset if applicable _____

Manufacturer's serial # _____ County inventory # _____

Month/Year asset transferred _____

***** IF AN OLD ASSET WAS TRADED-IN ON THE PURCHASE OF A NEW ASSET,
MAKE SURE TO COMPLETE A NEW FIXED ASSET FORM *****

I certify that to the best of my knowledge that the above information is true and correct.

Form completed by: _____ Date: _____

Supervisor Signature: _____ Date: _____

For Auditor's Use

Supervisor Signature: _____ Date: _____