

PROPERTY SURVEY REPORT

STD. 152 (REV. 9/00)-CDPH

Record as of disposition date (lost, stolen or destroyed property—record as of the date such determination was made).

RETURN TO:

REPORTING DEPARTMENT/AGENCY California Department of Public Health	Attention <input type="checkbox"/> Asset Management <input type="checkbox"/> Contractor Asset Management <input type="checkbox"/> Vehicle Services	DOCUMENT NUMBER
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RETURN ADDRESS P.O. Box 997377, 1501 Capitol Avenue, Suite 71.5178, MS 1801	IMS CODE H-01	DATE
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CITY Sacramento	ZIP CODE 95899-7377	REPLACEMENTS: SEE PURCHASE ESTIMATE NUMBER
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<i>Authority is requested to dispose of the following State property:</i>	FUND OWNED BY CDPH Program/Index:	CONTACT PERSON	TELEPHONE NUMBER ()
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ITEM-DESCRIPTION, MODEL NUMBER, SERIAL NUMBER, ETC.	STATE IDENT. NO. (1)	DATE PURCHASED	ORIGINAL COST	LOCATION (CITY)	PRESENT CONDITION	DISP. CODE*	PRICE OFFERED (2)	PRICE RECEIVED (3)	RECEIPT NUMBER
1.		/ /							
2.		/ /							
3.		/ /							
4.		/ /							
5.		/ /							
6.		/ /							
7.		/ /							

(1) PROPERTY TAG NUMBER OR NUMBER FOR VEHICLE (2) DO NOT OBTAIN BIDS ON TRADE-INS. ESTIMATE PRICE OFFERED (3) AMOUNT ALLOWED IF TRADED IN OR SOLD

<p>*DISPOSITION CODE</p> <p>1. TRADE-IN 2. SALE (INCLUDING JUNK SALE) 3. JUNK – VALUELESS GS 4. LOST** } 5. STOLEN** } DEPARTMENT OF GENERAL SERVICES REVIEW FOR 4, 5, & 6 NOT REQUIRED 6. DESTROYED (AS BY FIRE, ETC.) } 7. TO BE SALVAGED 8. PROPERTY REUTILIZATION--GENERAL SERVICES, SURPLUS PROPERTY **IF LOST, STOLEN OR DESTROYED, REFER TO SAM SECTION 8643 FOR INSTRUCTIONS.</p>	<p>EXPLANATION-REASONS FOR PROPOSED DISPOSITION OF EACH ITEM</p> <p>CDPH Program Location:</p>
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APPROVED BY PROPERTY SURVEY BOARD <i>(A minimum of two signatures is required)</i>	CERTIFICATION OF DISPOSITION	REVIEWED BY DEPT. OF GENERAL SERVICES
<p><i>The above statements regarding state property are true and correct; culpable negligence (check appropriate box)</i></p> <p><input checked="" type="checkbox"/> was <input type="checkbox"/> was not</p> <p><i>involved in loss, theft, or damage; the disposition proposed is better for the public interest.</i></p>	<p><i>The above described property was disposed of as follows:</i> (specify if no consideration was received)</p>	<p>FOR DGS REVIEW, SEND TO:</p> <p>Department of General Services State Agency for Surplus Property</p> <p>NORTH SOUTH 1700 National Drive 701 Burning Tree Road Sacramento, CA 95834 Fullerton, CA 92633</p>
	<p>SIGNATURE</p> <p>1.</p> <p>2.</p> <p>3.</p>	<p>MANNER OF DISPOSAL</p> <p>DISPOSAL DATE</p> <p>/ /</p> <p>SIGNATURE (<i>Officer Supervising Disposal of the Property</i>)</p> <p>TITLE</p>

(DO NOT USE HALF SHEETS OR STAPLES)