

IN THE COUNTY LEGISLATURE OF JACKSON COUNTY, MISSOURI

AN ORDINANCE renewing the tax of 6.00% of the tariff rate, for each local telephone access line, not to exceed 100 lines per person or per location, for emergency telephone service utilizing a single three-digit number "911."

ORDINANCE NO. 5247, August 5, 2019

INTRODUCED BY Jeanie Lauer, County Legislator

WHEREAS, sections 190.300 et seq., RSMo, as amended, authorized the County Legislature to establish a tax, upon a vote of the people, to finance an emergency telephone service, in an amount not to exceed two percent of the tariff rate, in those areas of the County where emergency 911 telephone service has been contracted for; and,

WHEREAS, pursuant to Ordinance 940, dated January 11, 1982, the proposal was submitted to the voters of Jackson County on August 6, 1982, for their approval of such service and tax, in accordance with section 190.320, RSMo, and a majority of the votes cast on the proposal were in favor thereof; and,

WHEREAS, pursuant to Ordinance 3771, dated May 22, 2006, a proposal was submitted to the voters of the County on August 8, 2006, for their approval of an increased maximum rate of such tax up to seven percent of the tariff rate, and, again, a majority of the votes cast on the proposal were in favor thereof; and,

WHEREAS, area telephone service companies provide 911 emergency telephone service to Jackson County, and collect a tax of 6.00% of the tariff rate for this service, pursuant to

Ordinance 5006, dated August 14, 2017; and,

WHEREAS, in view of estimated operating costs and plans of the regional E-911 system presented by the Mid-America Regional Council, it is appropriate that the tax be renewed County-wide at a rate of 6.00% of the tariff rate; and,

WHEREAS, the tax rate proposed does not exceed the rate authorized by the voters at the election of August 8, 2006; and,

WHEREAS, the Legislature has determined that, for the protection and preservation of public health and welfare, the operation of an emergency telephone system is beneficial to the citizens of the County; now therefore,

BE IT ORDAINED by the County Legislature of Jackson County, Missouri as follows:

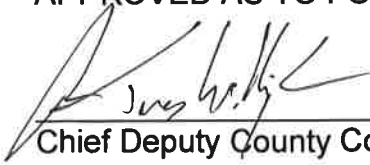
1. A tax for emergency telephone service, at the rate of 6.00% of the tariff rate for each local telephone exchange access line not to exceed 100 lines per person per location, is renewed, in those portions of Jackson County for which 911 emergency telephone service has been contracted for; and,

2. Such tax shall be renewed, as specified herein, subject to adjustments in percentage provided for by sections 190.300 et seq., RSMo.

3. Collection of said tax shall commence immediately and continue uninterrupted.

Effective Date: This Ordinance shall be effective immediately upon its signature by the County Executive.

APPROVED AS TO FORM:



Chief Deputy County Counselor



County Counselor

I hereby certify that the attached ordinance, Ordinance No. 5247 introduced on August 5, 2019, was duly passed on _____, 2019 by the Jackson County Legislature. The votes thereon were as follows:

Yeas _____

Nays _____

Abstaining _____

Absent _____

This Ordinance is hereby transmitted to the County Executive for his signature.

Date

Mary Jo Spino, Clerk of Legislature

I hereby approve the attached Ordinance No.5247.

Date

Frank White, Jr., County Executive

IN THE COUNTY LEGISLATURE OF JACKSON COUNTY, MISSOURI

A RESOLUTION authorizing the County Executive to execute an extension to the agreement with the City of Kansas City, Missouri, relating to the Prosecuting Attorney's Office's Drug Abatement Response Team (DART) program, through August 31, 2019, at no additional cost to the County.

RESOLUTION NO. 20211, August 5, 2019

INTRODUCED BY Dan Tarwater III, County Legislator

WHEREAS, by Resolution 20054, dated December 3, 2018, the Legislature did authorize an Agreement with the City of Kansas City, Missouri, for the Prosecuting Attorney's Office's Drug Abatement Response Team (DART) program, at a cost to the County not exceeding \$24,000.00, for the period July 1, 2018, to June 30, 2019; and,

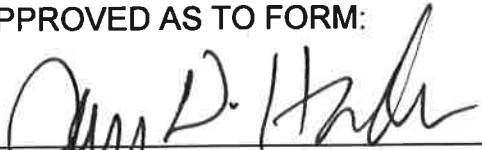
WHEREAS, the Prosecuting Attorney's Office has recommended an extension to this agreement through August 31, 2019, to provide for additional time to complete the current year's DART program, at no additional cost to the County; now therefore,

BE IT RESOLVED by the County Legislature of Jackson County, Missouri, that the County Executive be and hereby is authorized to execute an extension to the Agreement with the City of Kansas City, Missouri, for the DART program, at no additional cost to the County, in a form to be approved by the County Counselor; and,

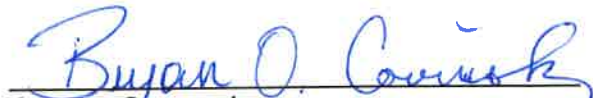
BE IT FURTHER RESOLVED that the Director of the Department of Finance and Purchasing be and hereby is authorized to make all payments, including final payment on the Agreement and extension thereto.

Effective Date: This Resolution shall be effective immediately upon its passage by a majority of the Legislature.

APPROVED AS TO FORM:



Chief Deputy County Counselor



County Counselor

Certificate of Passage

I hereby certify that the attached resolution, Resolution No. 20211 of August 5, 2019, was duly passed on _____, 2019 by the Jackson County Legislature. The votes thereon were as follows:

Yeas _____

Nays _____

Abstaining _____

Absent _____

Date

Mary Jo Spino, Clerk of Legislature

**REQUEST FOR LEGISLATIVE ACTION
EXECUTIVE OFFICE**

JUL 29 2019

Version 6/10/19

Completed by County Counselor's Office:

Res/Ord No.: 20211

Sponsor(s): Dan Tarwater III

Date: August 5, 2019

SUBJECT	<p>Action Requested <input checked="" type="checkbox"/> Resolution <input type="checkbox"/> Ordinance</p> <p>Project/Title: <u>Resolution authorizing the County Executive to extend the agreement with the City of Kansas City, Missouri for the furnishing of a DART Codes Enforcement Officer at no additional cost to the County.</u></p>											
<p>BUDGET INFORMATION <i>To be completed By Requesting Department and Finance</i></p>	<table border="1" data-bbox="313 573 1448 762"> <tr> <td>Amount authorized by this legislation this fiscal year:</td> <td style="text-align: right;">\$</td> </tr> <tr> <td>Amount previously authorized this fiscal year:</td> <td></td> </tr> <tr> <td>Total amount authorized after this legislative action:</td> <td style="text-align: right;">\$</td> </tr> <tr> <td>Amount budgeted for this item * (including transfers):</td> <td style="text-align: right;">\$</td> </tr> <tr> <td>Source of funding (name of fund) and account code number:</td> <td style="text-align: right;">\$</td> </tr> </table> <p>* If account includes additional funds for other expenses, total budgeted in the account is: \$</p> <p>OTHER FINANCIAL INFORMATION:</p> <p><input checked="" type="checkbox"/> No budget impact (no fiscal note required) <input type="checkbox"/> Term and Supply Contract (funds approved in the annual budget); estimated value and use of contract: Department: _____ Estimated Use: _____</p> <p>Prior Year Budget (if applicable): _____ Prior Year Actual Amount Spent (if applicable): _____</p>		Amount authorized by this legislation this fiscal year:	\$	Amount previously authorized this fiscal year:		Total amount authorized after this legislative action:	\$	Amount budgeted for this item * (including transfers):	\$	Source of funding (name of fund) and account code number:	\$
Amount authorized by this legislation this fiscal year:	\$											
Amount previously authorized this fiscal year:												
Total amount authorized after this legislative action:	\$											
Amount budgeted for this item * (including transfers):	\$											
Source of funding (name of fund) and account code number:	\$											
PRIOR LEGISLATION	<p>Prior ordinances and (date): _____ Prior resolutions and (date): 20054 12/3/18</p>											
CONTACT INFORMATION	<p>RLA drafted by (name, title, & phone): Gina Robinson, Chief of Operations, 816-881-3369</p>											
REQUEST SUMMARY	<p>This resolutions authorizes the County Executive to extend the agreement with City of Kansas City, Missouri for the furnishing of a Codes Enforcement Officer to assist with the DART program. This extension poses no additional cost to the County. REQUESTING CONTRACT EXT. 8/31/19. <i>at</i></p>											
CLEARANCE	<p><input type="checkbox"/> Tax Clearance Completed (Purchasing & Department) <input type="checkbox"/> Business License Verified (Purchasing & Department) <input type="checkbox"/> Chapter 6 Compliance - Affirmative Action/Prevailing Wage (County Auditor's Office)</p>											
COMPLIANCE	<p><input type="checkbox"/> MBE Goals <input type="checkbox"/> WBE Goals <input type="checkbox"/> VBE Goals</p>											
ATTACHMENTS												
REVIEW	<table border="1" data-bbox="313 1633 1252 1879"> <tr> <td>Department Director: <i>Jean Peters Baker</i></td> <td>Date: <i>7/24/19</i></td> </tr> <tr> <td>Finance (Budget Approval): <i>N/A</i> <i>If applicable</i></td> <td>Date:</td> </tr> <tr> <td>Division Manager: <i>Gary Paethner</i></td> <td>Date: <i>7.29.19</i></td> </tr> <tr> <td>County Counselor's Office: <i>Bryan Conish</i></td> <td>Date: <i>7/29/19</i></td> </tr> </table>		Department Director: <i>Jean Peters Baker</i>	Date: <i>7/24/19</i>	Finance (Budget Approval): <i>N/A</i> <i>If applicable</i>	Date:	Division Manager: <i>Gary Paethner</i>	Date: <i>7.29.19</i>	County Counselor's Office: <i>Bryan Conish</i>	Date: <i>7/29/19</i>		
Department Director: <i>Jean Peters Baker</i>	Date: <i>7/24/19</i>											
Finance (Budget Approval): <i>N/A</i> <i>If applicable</i>	Date:											
Division Manager: <i>Gary Paethner</i>	Date: <i>7.29.19</i>											
County Counselor's Office: <i>Bryan Conish</i>	Date: <i>7/29/19</i>											

Fiscal Information (to be verified by Budget Office in Finance Department)

- This expenditure was included in the annual budget.
- Funds for this were encumbered from the _____ Fund in _____.
- There is a balance otherwise unencumbered to the credit of the appropriation to which the expenditure is chargeable and there is a cash balance otherwise unencumbered in the treasury to the credit of the fund from which payment is to be made each sufficient to provide for the obligation herein authorized.
- Funds sufficient for this expenditure will be/were appropriated by Ordinance # _____
- Funds sufficient for this appropriation are available from the source indicated below.

Account Number:	Account Title:	Amount Not to Exceed:

- This award is made on a need basis and does not obligate Jackson County to pay any specific amount. The availability of funds for specific purchases will, of necessity, be determined as each using agency places its order.
- This legislative action does not impact the County financially and does not require Finance/Budget approval.

IN THE COUNTY LEGISLATURE OF JACKSON COUNTY, MISSOURI

A RESOLUTION authorizing the County Executive to execute an extension to the Agreement with the Ad Hoc Group Against Crime of Kansas City, Missouri, for Community Outreach efforts under the SMART Prosecution grant initiative, at no additional cost to the County.

RESOLUTION NO. 20212, August 5, 2019

INTRODUCED BY Jeanie Lauer, County Legislator

WHEREAS, by Resolution 19871, dated May 21, 2018, the Legislature did authorize an agreement with Ad Hoc Group Against Crime for community outreach under the SMART Prosecution Grant initiative at a cost to the County not to exceed \$3,777.00; and,

WHEREAS, the Prosecuting Attorney now recommends an extension to the Agreement with the Ad Hoc Group Against Crime, through September 30, 2019, to allow additional time to complete the program, at no additional cost to the County; now therefore,

BE IT RESOLVED by the County Legislature of Jackson County, Missouri, that the County Executive be and hereby is authorized to execute an extension to the Agreement with Ad Hoc Group Against Crime, through September 30, 2019, in a form to be approved by the County Counselor; and,

BE IT FURTHER RESOLVED that the Director of the Department of Finance and Purchasing be and hereby is authorized to make all payments including final payment on the Agreement and extension thereto.

Effective Date: This Resolution shall be effective immediately upon its passage by a majority of the Legislature.

APPROVED AS TO FORM:



Chief Deputy County Counselor



County Counselor

Certificate of Passage

I hereby certify that the attached resolution, Resolution No. 20212 of August 5, 2019, was duly passed on _____, 2019 by the Jackson County Legislature. The votes thereon were as follows:

Yeas _____

Nays _____

Abstaining _____

Absent _____

Date

Mary Jo Spino, Clerk of Legislature

REQUEST FOR LEGISLATIVE ACTION
EXECUTIVE OFFICE

Version 6/10/19

Completed by County Counselor's Office:

Res/Ord No.: 20212

Sponsor(s): Jeanie Lauer

Date: August 5, 2019

JUL 29 2019

SUBJECT	<p>Action Requested <input checked="" type="checkbox"/> Resolution <input type="checkbox"/> Ordinance</p> <p>Project/Title: <u>Resolution authorizing the County Executive to extend an agreement with Ad Hoc Group Against Crime of Kansas City, Missouri for Community Outreach Efforts under the SMART Prosecution Grant initiative at no additional cost to the County.</u></p>											
<p>BUDGET INFORMATION <i>To be completed By Requesting Department and Finance</i></p>	<table border="1" data-bbox="316 577 1453 766"> <tr> <td>Amount authorized by this legislation this fiscal year:</td> <td style="text-align: right;">\$</td> </tr> <tr> <td>Amount previously authorized this fiscal year:</td> <td></td> </tr> <tr> <td>Total amount authorized after this legislative action:</td> <td style="text-align: right;">\$</td> </tr> <tr> <td>Amount budgeted for this item * (including transfers):</td> <td style="text-align: right;">\$</td> </tr> <tr> <td>Source of funding (name of fund) and account code number:</td> <td style="text-align: right;">\$</td> </tr> </table> <p>* If account includes additional funds for other expenses, total budgeted in the account is: \$</p> <p>OTHER FINANCIAL INFORMATION:</p> <p><input checked="" type="checkbox"/> No budget impact (no fiscal note required) <input type="checkbox"/> Term and Supply Contract (funds approved in the annual budget); estimated value and use of contract: Department: _____ Estimated Use: _____</p> <p>Prior Year Budget (if applicable): 3,777.00 Prior Year Actual Amount Spent (if applicable): _____</p>		Amount authorized by this legislation this fiscal year:	\$	Amount previously authorized this fiscal year:		Total amount authorized after this legislative action:	\$	Amount budgeted for this item * (including transfers):	\$	Source of funding (name of fund) and account code number:	\$
Amount authorized by this legislation this fiscal year:	\$											
Amount previously authorized this fiscal year:												
Total amount authorized after this legislative action:	\$											
Amount budgeted for this item * (including transfers):	\$											
Source of funding (name of fund) and account code number:	\$											
PRIOR LEGISLATION	<p>Prior ordinances and (date): _____ Prior resolutions and (date): 19871 7/2/18</p>											
CONTACT INFORMATION	<p>RLA drafted by (name, title, & phone): Gina Robinson, Chief of Operations, 816-881-3369</p>											
REQUEST SUMMARY	<p>This resolutions authorizes the County Executive to an agreement with Ad Hoc Group Against Crime for Community Outreach under the SMART Prosecution initiative for the duration of the grant award. The grant expiration date has been extended by DOJ until <u>September 30, 2019</u>. This extension poses no additional cost to the County.</p>											
CLEARANCE	<p><input type="checkbox"/> Tax Clearance Completed (Purchasing & Department) <input type="checkbox"/> Business License Verified (Purchasing & Department) <input type="checkbox"/> Chapter 6 Compliance - Affirmative Action/Prevailing Wage (County Auditor's Office)</p>											
COMPLIANCE	<p><input type="checkbox"/> MBE Goals <input type="checkbox"/> WBE Goals <input type="checkbox"/> VBE Goals</p>											
ATTACHMENTS												
REVIEW	<table border="1" data-bbox="308 1669 1526 1911"> <tr> <td>Department Director: <i>Jean Peters Baker</i></td> <td>Date: <i>7/24/19</i></td> </tr> <tr> <td>Finance (Budget Approval): <i>N/A</i> <i>If applicable</i></td> <td>Date: _____</td> </tr> <tr> <td>Division Manager: <i>[Signature]</i></td> <td>Date: <i>7/29/19</i></td> </tr> <tr> <td>County Counselor's Office: <i>[Signature]</i></td> <td>Date: <i>7/31/19</i></td> </tr> </table>		Department Director: <i>Jean Peters Baker</i>	Date: <i>7/24/19</i>	Finance (Budget Approval): <i>N/A</i> <i>If applicable</i>	Date: _____	Division Manager: <i>[Signature]</i>	Date: <i>7/29/19</i>	County Counselor's Office: <i>[Signature]</i>	Date: <i>7/31/19</i>		
Department Director: <i>Jean Peters Baker</i>	Date: <i>7/24/19</i>											
Finance (Budget Approval): <i>N/A</i> <i>If applicable</i>	Date: _____											
Division Manager: <i>[Signature]</i>	Date: <i>7/29/19</i>											
County Counselor's Office: <i>[Signature]</i>	Date: <i>7/31/19</i>											

Fiscal Information (to be verified by Budget Office in Finance Department)

- This expenditure was included in the annual budget.
- Funds for this were encumbered from the _____ Fund in ____.
- There is a balance otherwise unencumbered to the credit of the appropriation to which the expenditure is chargeable and there is a cash balance otherwise unencumbered in the treasury to the credit of the fund from which payment is to be made each sufficient to provide for the obligation herein authorized.
- Funds sufficient for this expenditure will be/were appropriated by Ordinance #
- Funds sufficient for this appropriation are available from the source indicated below.

Account Number:	Account Title:	Amount Not to Exceed:

- This award is made on a need basis and does not obligate Jackson County to pay any specific amount. The availability of funds for specific purchases will, of necessity, be determined as each using agency places its order.
- This legislative action does not impact the County financially and does not require Finance/Budget approval.

IN THE COUNTY LEGISLATURE OF JACKSON COUNTY, MISSOURI

A RESOLUTION declaring certain vehicles and equipment items within various County departments as surplus and unusable personal property and authorizing their disposal.

RESOLUTION NO. 20213, August 5, 2019

INTRODUCED BY Crystal Williams, County Legislator

WHEREAS, various County departments are in possession of miscellaneous vehicles and equipment that are no longer functional and/or can no longer be used for their intended purposes, further described and itemized in the attached declaration forms; and,

WHEREAS, the Director of Finance and Purchasing recommends that said property be declared surplus, unusable and disposed of or transferred pursuant to Chapter 11 of the Jackson County Code; and,

WHEREAS, the Sheriff's Office has recommended the transfer of four specified vehicles to the Parks + Rec Department; now therefore,

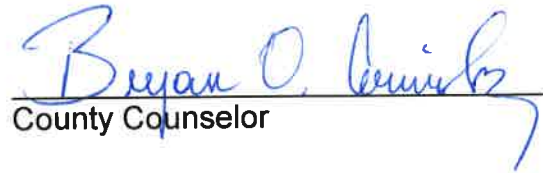
BE IT RESOLVED by the County Legislature of Jackson County, Missouri, that the property within the various County departments further described and itemized in the attached declaration forms, be and hereby is declared surplus, and that the Department of Finance and Purchasing be and hereby is authorized the transfer of it as indicated and as provided for in Chapter 11, Jackson County Code, 1984.

Effective Date: This Resolution shall be effective immediately upon its passage by a majority of the Legislature.

APPROVED AS TO FORM:



Chief Deputy County Counselor



County Counselor

Certificate of Passage

I hereby certify that the attached resolution, Resolution No. 20213 of August 5, 2019, was duly passed on _____, 2019 by the Jackson County Legislature. The votes thereon were as follows:

Yeas _____

Nays _____

Abstaining _____

Absent _____

Date

Mary Jo Spino, Clerk of Legislature

-DO NOT DUPLICATE-

SURPLUS/TRANSFER DECLARATION FORM
JACKSON COUNTY, MISSOURI
SURPLUS

TRANSFER

Date of Surplus: 5-10-2019

Department Name: Sheriff's Office Department Code: 4201

Point of Contact: Deputy Murphy Phone Number: 816-308-7712

Please Check: Surplus Transfer

Transaction Date	Fixed Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
6-3-19	14983	2002 Chevy Tahoe	D	2002	Chevy	1GNEC13V32J312117	17	6-11-02	24,000
6-3-19	9317	2009 Dodge Charger	D	2009	Dodge	2B3K443T9H12913	10	5-5-09	22,075.60
6-3-19	9319	2009 Dodge Charger	D	2009	Dodge	2B3K443T9H12913	10	5-5-09	23,955.60
6-3-19	10110	2010 Dodge Charger	D	2010	Dodge	1B3CAUC13AH193279	9	4-6-10	23,155.60

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.

** Refer to Asset Subclass Listing.

- 1. User Department send to Finance Department
- 2. Purchasing Department send to Finance Department

-DO NOT DUPLICATE-

SURPLUS/TRANSFER DECLARATION FORM
JACKSON COUNTY, MISSOURI
SURPLUS

TRANSFER

Department Name: Public Works		Department Code: 1506		Date Transfer Received:				
Point of Contact: MATT WILLIERS		Phone Number: 816-847-7083		Department Transferring Asset:				
Please Check: Select only one <input checked="" type="checkbox"/> Surplus <input type="checkbox"/> Transfer				Department Receiving Asset:				
Transaction Date		Disposition Code*		Receiving Department Phone Number:				
Fixed Asset #		Asset Description		Serial/Vin Number				
Model Year		Make/Model		Useful Life**				
Purchase Date		Original Cost						
NO	001879	Ford Crown Victoria	C-2056	2001	Ford Crown vic	2FAFP71W51X190175	6/1/01	20,903
OK	003466	Ford 150 Pickup Truck	P-2140	2001	Ford F150	1FTRX18WKNB32074	3/23/01	22,626
OK	003404	INTERNATIONAL 54900 DUMP TRUCK	D-2321	1997	INT 54900	1HTSPAARGVH439144	8/27/96	41,919
		ALUMINUM TRUCK BED ONLY		2017	Ford F450	TRUCK BED ONLY		
		HP PLOTTER			GLA73A	SG787N9026		

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.
 ** Refer to Asset Subclass Listing.

1. User Department send to Finance Department
2. Purchasing Department send to Finance Department



SURPLUS/TRANSFER DECLARATION FORM
JACKSON COUNTY, MISSOURI

-DO NOT DUPLICATE-

SURPLUS Mowers

TRANSFER

Department Name: Parks + Rec Department Code: 11614
 Point of Contact: John Johnson Phone Number: 816-503-4823
 Please Check: Select only one
 Surplus Transfer

Transaction Date	Fixed Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
8/10/18	MP-3527	07 JD1600 Turbodiesel		2007	JD1600	Te1600T050222		5-2-07	44,446. ⁷⁵
2/4/19	ML-AAA	96 Alamo 15' mower		1996	Alamo/15'	03701		5-21-96	6,991. ⁰⁰
2/4/19	ML-EE	87 Ford 3point mower		1987	Ford/mower	YH2944C		1987	unknown

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.
 ** Refer to Asset Subclass Listing.
 1. User Department send to Finance Department
 2. Purchasing Department send to Finance Department

-DO NOT DUPLICATE-



SURPLUS/TRANSFER DECLARATION FORM
JACKSON COUNTY, MISSOURI

SURPLUS Misc **TRANSFER**

Date of Surplus:

Department Name: Parks & Rec Department Code: 1614

Point of Contact: John Johnson Phone Number: 816-503-4823

Please Check: Select only one
 Surplus Transfer

Receiving Department Contact:
 Receiving Department Phone Number:

Transaction Date	Fixed Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
	M-3875	1996 SD 4x2 Gator		1996	SD/Gator	W004 X2X017888		11-21-96	4,492.00
	M-3877	1997 SD Gator 4x6		1997	SD/Gator	W006 X4X025749		6-12-97	6,048.23

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.
 ** Refer to Asset Subclass Listing.

1. User Department send to Purchasing Department
2. Purchasing Department send to Finance Department

SURPLUS/TRANSFER DECLARATION FORM
JACKSON COUNTY, MISSOURI

-DO NOT DUPLICATE-

SURPLUS Vehicles - Trailers - Other TRANSFER



Date of Surplus: _____ Date Transfer Received: _____

Department Name: Parks & Rec Department Code: 1614 Department Transferring Asset: _____

Point of Contact: Saba Johnson Phone Number: 816-503-4823 Department Receiving Asset: _____

Please Check: Select only one Surplus Transfer Receiving Department Contact: _____

Receiving Department Phone Number: _____

Transaction Date	Fixed Asset #		Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
	Asset #	Asset #								
1/22/19	P-3103	1995	1995 Jeep Cherokee		1995	Jeep	134F327S95L698956		2/4/95	17,673.89
2/4/19	TH-3364	2000	Trash 4900 Truck		2000	International	4900 HTSDAA R8YH260887		12/2/99	42,772.00
2/4/19	TH-3303	1981	81 F-2575 FHC- Boy		1981	International	2575 HTDF2574BHA30422		7/19/93	45,153.00
2/4/19	TLR-3672	1993	93 60-Boy Trailer		1993	Moden Trailer	12HGE4425R3E4074		7/19/93	21,145.00

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.
 ** Refer to Asset Subclass Listing.

1. User Department send to Purchasing Department
2. Purchasing Department send to Finance Department



SURPLUS/TRANSFER DECLARATION FORM

JACKSON COUNTY, MISSOURI

-DO NOT DUPLICATE-

SURPLUS

TRANSFER

Department Name: Parks - Marina Point of Contact: Jim Autry Phone Number: 816-795-8888		Date Transfer Received: Department Transferring Asset: Department Receiving Asset: Receiving Department Contact: Receiving Department Phone Number:	
Department Code: 1653		Serial/Vin Number:	
Disposition Code*:		Make/Model:	
Asset Description:		Model Year:	
Surplus <input type="checkbox"/> Transfer <input type="checkbox"/>		Useful Life**:	

Transaction Date	Fixed Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
		24' Pontoon		2001	Clipper 2400	PLF 93544 F001		2001	\$8750
		24' Pontoon		2001	Clipper 2400	PLF 93545 F001		2001	\$8750
		24' Pontoon		2002	Clipper 2400	PLF 94136 E202		2002	\$8988
		25hp Outboard Motor		2004	J25 ELSRM	05060398		2004	\$1765
		25hp Outboard Motor		2002	J25 ELSNF	04995347		2002	\$1873
		25hp Outboard Motor		2005	J25 ELSOB	05105578		2005	\$1788

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.
 ** Refer to Asset Subclass Listing.

1. User Department send to Finance Department
2. Purchasing Department send to Finance Department



SURPLUS/TRANSFER DECLARATION FORM

JACKSON COUNTY, MISSOURI

SURPLUS

TRANSFER

-DO NOT DUPLICATE-

Date of Surplus:		Date Transfer Received:							
Transaction Date	Fixed Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
		REFRIGERATOR		(1)		UNKNOWN		UNKNOWN	111,200.00
		CRAZY		(3)					
		TABLE		(6)					
		DESK		(11)					
		5 DRAWER FILE CABINET		(1)					
		4 DRAWER FILE CABINET		(7)					
		2 DRAWER FILE CABINET		(2)					
		OFFICE CHAIR		(23)					
		2 DRAWER LATERAL FILE		(2)					
		COAT RACK		(2)					
		3 DRAWER LATERAL FILE		(1)					
		4 DRAWER LATERAL FILE		(1)					

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.

** Refer to Asset Subclass Listing.

1315 Locust, Floor 1, Prosecutor

2 of 1

1. User Department send to Finance Department

ALL ITEMS WILL BE TAKEN TO STORAGE AT PARKS+REC
UNTIL THEY CAN BE MOVED INTO SURPLUS
-DO NOT DUPLICATE-

SURPLUS/TRANSFER DECLARATION FORM
JACKSON COUNTY, MISSOURI
SURPLUS



TRANSFER

Department Name: Parks + Rec	Department Code: 1657	Department Transferring Asset:
Point of Contact: Stephenie Thompson	Phone Number: (816) 229-8980 x 106	Department Receiving Asset:
Please Check: Select only one <input checked="" type="checkbox"/> Surplus <input type="checkbox"/> Transfer		Receiving Department Phone Number:
		Receiving Department Contact:
		Date Transfer Received:

Transaction Date	Fixed Asset #	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life	Purchase Date	Original Cost
12-12-18	00015588			HP/2300n	CNBDC71293			
12-12-18	005495			View Sonic VX1940W	QRA083320981			
12-12-18	None shown			DP/N 0DJ454	CN-0DJ454-71581-3AF-OF57-A01			
12-12-18	None shown			REV A00	CN-07N242-71616-3BA-8795			
12-12-18	None shown			None	CN-04N567-48220-2CU-0A7M			
12-12-18	None Shown			None	CN-0KW2YH-71616-5AJ-3DBY			
12-12-18	00007792			HP/C3980A	USCD072937			
12-12-18	009915			Dell/7FRSJQ1	16191150553 Ref code 09245 Label p/n 8VFXR A00			
12-12-18	None Shown			None	None			
12-12-18	None Shown			None	None			
12-12-18	NA			NA	NA			
12-12-18	802			NA	NA			
12-12-18	06400			NA	NA			
12-27-18	None Shown			IntelliFAX2840	U63274E5J95594			
12-12-18	22134			NA	NA			
12-12-18	16518			NA	NA			
12-12-18	None shown			NA	NA			

1. User Department send to Finance Department
2. Purchasing Department send to Finance Department

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.
** Refer to Asset Subclass Listing.



SURPLUS/TRANSFER DECLARATION FORM
JACKSON COUNTY, MISSOURI

-DO NOT DUPLICATE-

SURPLUS

TRANSFER

Date of Surplus: _____ Date Transfer Received: _____
 Department Name: CORRECTIONS Department Code: 2701 Department Transferring Asset: _____
 Point of Contact: CAROL MACHEN Phone Number: 916-813-9362 Department Receiving Asset: _____
 Please Check: Select only one
 Surplus Transfer Receiving Department Contact: _____
 Receiving Department Phone Number: _____

Transaction Date	Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
		PC CHASSIS (35)			.	UNKNOWN		UNKNOWN	
		CRT MONITORS (17)							
		KEY BOARDS (28)							
		FLAT SCREEN MONITORS (12)							
		FAX/PRINTERS (8)							
		SWITCHES (11)							
		VOIP PHONES (8)							
		RADIO CHARGERS (4)							
		AMBER MATRIX (1)							
		HARD DRIVES (16)							
		TYPEWRITER (1)							

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.

** Refer to Asset Subclass Listing.

3rd Floor Annex

5 of 5

1. User Department send to Finance Department



SURPLUS/TRANSFER DECLARATION FORM
JACKSON COUNTY, MISSOURI

-DO NOT DUPLICATE-

TRANSFER

SURPLUS

Date of Surplus: <u>5/21/19</u>		Date Transfer Received:
Department Name: <u>Public Rec</u>		Department Transferring Asset:
Point of Contact: <u>Brian Moroney</u>		Department Receiving Asset:
Phone Number: <u>816-503-4803</u>		Receiving Department Contact:
Please Check: <input checked="" type="checkbox"/> Surplus <input type="checkbox"/> Transfer		Receiving Department Phone Number:

Transaction Date	Fixed Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
		<u>165 General Electric Ultra-Sport Stadium light fixtures removed from Lawman Stadium by the Royals</u>							

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.

** Refer to Asset Subclass Listing.

-DO NOT DUPLICATE-

SURPLUS/TRANSFER DECLARATION FORM

JACKSON COUNTY, MISSOURI

SURPLUS Misc Stuff

TRANSFER

Date of Surplus: _____

Department Name: Parks + Rec Department Code: 1614 Date Transfer Received: _____

Point of Contact: John Sahaen Phone Number: 816-503-4823 Department Transferring Asset: _____

Please Check: Select only one
 Surplus Transfer
 Receiving Department Contact: _____
 Receiving Department Phone Number: _____

Transaction Date	Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
2/4/19	M-082	1994 Toro Seeder		1994	Toro/Seeder	4483540247		1994	3,893.00
2/4/19	M-3867	1994 American Ride Golf Cart		1994	American Ride Golf Cart	189301		1994	2,495.00
2/4/19	N/A	150 Gal Plastic White Water Tank		N/A	N/A	N/A		UNKNOWN	
2/4/19	N/A	150 Gal Plastic Water Tank		N/A	N/A	N/A		UNKNOWN	
2/4/19	HE-3712	1981 ModCat Weed Harvester		1981	Modcat Harvester	H8710880001		1981	29,000.00
2/4/19	TLR-3612	1981 E-Zload Trailer		1981	E-Zload Trailer	12EITMX21BA005485		1981	7,000.00
2/4/19	M-3879	Northman Snow Blower		1997	Northman Snow Blower	943020		1997	UNKNOWN
2/6/19	M-168	1996 Promac Brush Chipper		1996	Promac Chipper Attachment	36CMP-516		1996	27,846.00
2/6/19	T-3443	1991 SD 2355 Attachment		1991	John Deere 2355 Bobcat	721354		1991	16,926.00
2/6/19	M-203	16" Street Sweeper		N/A	Street Sweeper	434700300		UNKNOWN	

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.
 ** Refer to Asset Subclass Listing.

1. User Department send to Purchasing Department
 2. Purchasing Department send to Finance Department



SURPLUS/TRANSFER DECLARATION FORM

JACKSON COUNTY, MISSOURI

SURPLUS

-DO NOT DUPLICATE-

TRANSFER

Date of Surplus: 9/27/2018

Department Name: Court IT Department Code: 3001\CS01 Date Transfer Received:

Point of Contact: Deana Grant Phone Number: 816-881-3262 Department Transferring Asset:

Please Check: Select only one

Surplus
 Transfer
 Receiving Department Contact:
 Receiving Department Phone Number:

Transaction Date	Fixed Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
	100-02658	Canon scanner		2006	Canon DR2580C	DG308347	4y	7/15/2006	N/A
	100-00587	Z230 Desktop PC		2015	T2A34US#ABA	2UA6010T83	4y	12/17/2015	\$584.28
	100-00150	Z230 Desktop PC		2015	F0K33UP#ABA	2UA5170SNQ	4y	5/1/2015	\$795.42
	100-00154	Z230 Desktop PC		2015	F0K33UP#ABA	2UA5170SNX	4y	5/1/2015	\$795.42
	100-00275	Z230 Desktop PC		2015	F0K33UP#ABA	2UA5342N5R	4y	9/2/2015	\$735.00
	100-02141	HP L1906 Monitor		2007	L1906	CNN71424SY	4y	6/27/2007	N/A
	100-04029	HP LA2205wg Monitor		2011	NM274A	3CQ131N6K1	4y	2011	N/A
	100-01653	ThinkVision LT2252p		N/A	2572MB1	6V8ZH191	4y	N/A	N/A
	100-02712	HP ProBook 650 G1 with Docking Station		2014	A7E36AA#ABA	5CG436372V	4y	9/15/2014	N/A
	100-01425	HP Compaq 8200 Elite		2011	QR807US#ABA	MXL14015KQ	4y	10/14/2011	N/A
	100-02140	HP Compaq 8200 Elite		2011	QR807US#ABA	MXL128253N	4y	2/7/2011	N/A
	100-00750	Lenovo Thinkpad W520		2011	427637U	R9CNX8F	4y	7/11/2011	N/A
	100-02353	HP E231 monitor		2014	C9V75A#ABA	3CQ412178C	4y	6/18/2014	\$176.00
	100-02910	HP Z230 SFF PC		2014	D1P35AV	2UA45212S3	4y	1/7/2015	\$812.30
	100-02906	HP Z230 SFF PC		2014	D1P35AV	2UA45212S9	4y	1/7/2015	\$812.30
	100-02908	HP Z230 SFF PC		2014	D1P35AV	2UA45212SB	4y	1/7/2015	\$812.30

Green Duct tape tag all items on this list.

1. User Department send to Finance Department

100-00394	HP Z230 SFF PC		2015	DIP35AV	2UA5492CRF	4y	11/18/2015	\$581.36
100-02904	HP Z230 SFF PC		2014	DIP35AV	2UA45212S4	4y	1/7/2015	\$812.30
100-00270	HP Z230 SFF PC		2015	F0K33UP#ABA	2UA5342N5J	4y	9/2/2015	\$735.00
100-02905	HP Z230 SFF PC		2014	DIP35AV	2UA45212S5	4y	1/7/2015	\$812.30
100-01685	ThinkVision LT2252p		N/A	2572MB1	6V8ZD064	4y	N/A	N/A
100-02911	HP Z230 SFF PC		2014	DIP35AV	2UA45212RZ	4y	1/7/2015	\$812.30
100-02909	HP Z230 SFF PC		2014	DIP35AV	2UA45212SC	4y	1/7/2015	\$812.30
100-00401	HP Z230 SFF PC		2015	T2A34US#ABA	2UA5492CQ2	4y	11/18/2015	\$581.36
100-02913	HP Z230 SFF PC		2014	DIP35AV	2UA45212S8	4y	1/7/2015	\$812.30
100-01261	ThinkVision LT2252p		N/A	2572MB1	6V8ZH196	4y	N/A	N/A
100-01631	ThinkVision LT2252p		N/A	2572MB1	6V8ZC340	4y	N/A	N/A
100-01259	ThinkVision LT2252p		N/A	2572MB1	6V1Z3329	4y	N/A	N/A
100-01257	ThinkVision LT2252p		N/A	2572MB1	6V8ZH204	4y	N/A	N/A
1 Box	Assorted Power Cables							
100-00399	HP Z230 SFF PC		2015	T2A34US#ABA	2UA5492CRD	4y	11/18/2015	\$581.36
100-00418	HP Z230 SFF PC		2015	T2A34US#ABA	2UA5492CQF	4y	11/18/2015	\$581.36
100-01472	ThinkVision LT2572		N/A	2572-MB6	6V8DE455	4y	N/A	N/A
N/A	ThinkVision LT2572		N/A	2572-MB1	V1Z3323	4y	N/A	N/A
1 Box	8 - Monitor Stands							
100-00788	Lenovo Thinkpad W510		2010	Thinkpad 510	R9A2VPV	4y	12/27/2010	N/A
1 Box	Speakers, Keyboards & Mice							
100-00160	HP Z230 SFF PC		2015	F0K33UP#ABA	2UA5170SNL	4y	5/1/2015	\$795.42
100-00661	ThinkPad W510 Laptop		2010	4318CTO	R83C6Z7	4y	6/7/2010	N/A
100-02229	Lenovo IdeaPad U410 Laptop		N/A	U410	QB05089551	4y	N/A	N/A

1. User Department send to Finance Department

100-02213	Dell Vostro 3700 Laptop	2010	3700	13PFCL1	4y	6/30/2010	N/A
100-02945	Lenovo Monitor		ThinkVision L2252 P	6V8ZC279	4y	6/28/2016	N/A
100-03358	Lenovo ThinkPad W530	2012	2441-CTO	R9VVDFW	4y	N/A	N/A
100-03464	Lenovo ThinkPad W530	2012	2441-CTO	R9VVDFV	4y	N/A	N/A
	2 - Avaya 1603 Phones						
100-00556	HP Z230 SFF PC	2015	T2A34US#ABA	2UA6010T78	4y	12/17/2015	\$584.28
100-02177	HP Z230 SFF PC	2014	D1P35AV	2UA3511FSQ	4y	N/A	N/A
100-00328	HP Z230 SFF PC	2014	D1P35AV	2UA3511FSC	4y	N/A	N/A
100-00149	HP Z230 SFF PC	2015	F0K33UP#ABA	2UA5170SPC	4y	5/1/2015	\$795.42
100-00137	HP Z230 SFF PC	2015	F0K33UP#ABA	2UA5170SNS	4y	5/1/2015	\$795.42
100-00156	HP Z230 SFF PC	2015	F0K33UP#ABA	2UA5170SPB	4y	5/1/2015	\$795.42
100-00143	HP Z230 SFF PC	2015	F0K33UP#ABA	2UA5170SNN	4y	5/1/2015	\$795.42
100-00157	HP Z230 SFF PC	2015	F0K33UP#ABA	2UA5170SNK	4y	5/1/2015	\$795.42
100-00164	HP Z230 SFF PC	2015	F0K33UP#ABA	2UA5170SNV	4y	5/1/2015	\$795.42
100-00148	HP Z230 SFF PC	2015	F0K33UP#ABA	2UA5170SP5	4y	5/1/2015	\$795.42
100-00151	HP Z230 SFF PC	2015	F0K33UP#ABA	2UA5170SP1	4y	5/1/2015	\$795.42
100-03129	Viewsonic VG2228wm Monitor	N/A	VS12512	S34105000314	4y	N/A	N/A
100-03386	Viewsonic VG2228wm Monitor	N/A	VS12512	S34105000328	4y	N/A	N/A
100-03127	Viewsonic VG2228wm Monitor	N/A	VS12512	S34105000296	4y	N/A	N/A
100-01629	ThinkVision LT2252p	N/A	2572MB1	6V8ZC313	4y	N/A	N/A
100-01468	ThinkVision LT2252p	N/A	2572MB1	6V8ZC200	4y	N/A	N/A
100-01646	ThinkVision LT2252p	N/A	2572MB1	6V8ZH209	4y	N/A	N/A
100-01638	ThinkVision LT2252p	N/A	2572MB1	6V8ZC259	4y	N/A	N/A
100-01634	ThinkVision LT2252p	N/A	2572MB1	6V8ZC276	4y	N/A	N/A

100-00380	HP Z230 SFF PC	2014	T2A34US#ABA	2UA5492CQC	4y	11/18/2015	\$581.36
100-00382	HP Z230 SFF PC	2015	T2A34US#ABA	2UA5492CQ7	4y	11/18/2015	\$581.36
100-00383	HP Z230 SFF PC	2015	T2A34US#ABA	2UA5492CQJ	4y	11/18/2015	\$581.36
100-00384	HP Z230 SFF PC	2014	T2A34US#ABA	2UA5492CQL	4y	11/18/2015	\$581.36
100-00385	HP Z230 SFF PC	2015	T2A34US#ABA	2UA5492CR7	4y	11/18/2015	\$581.36
100-00337	HP MONITOR	2015	Z23i	3CQ5311LK1	4y	11/18/2015	\$176.80
100-01422	HP LA2205WG MONITOR	N/A	LA2205WG	3CQ131N63W	4y	N/A	N/A
100-01414	ThinkVision LT2252p	N/A	2572MB1	V1Z3312	4y	N/A	N/A
100-00393	HP Z230 SFF PC	2015	T2A34US#ABA	2UA5492CRC	4y	11/18/2015	\$581.36
100-02945	ThinkVision LT2252p	N/A	2572MB1	6V8ZC279	4y	N/A	N/A
N/A	OfficeConnect Dual Speed Hub 5	2004	3Com	LB5G310098900	4y	8/17/2004	N/A
N/A	OfficeConnect Dual Speed Hub 5	2004	3Com	LB5G320106701	4y	8/17/2004	N/A
100-00427	HP Z230 SFF PC	2015	T2A34US#ABA	2UA5492CQB	4y	11/18/2015	\$581.36
100-00608	HP Z230 SFF PC	2015	T2A34US#ABA	2UA6010T9P	4y	12/17/2015	\$584.28
1 Box	1 - Avaya 1608 Phone						
39397	HP JetDirect 170X	2006	J3258G	SG7315F55	4y	11/20/2006	N/A
100-03283	HP LA2205wg Monitor	2011	LA2205WG	3CQ144CVRR	4y	N/A	N/A
100-04041	HP LA2205wg Monitor	2011	LA2205WG	3CQ131N64P	4y	N/A	N/A
100-02082	Back-up Power Supply (UPS)	2007	Smart1500SLT	9544ALCSM538800310	5+y	8/6/2007	N/A
100-02134	ThinkPad W510 Laptop w/Docking Station	2011	4318CTO	R9CMX1W	4y	5/2/2011	N/A
1 Box	Power Cables						
100-00395	HP Z230 SFF PC	2015	T2A34US#ABA	2UA5492CQY	4y	11/18/2015	\$581.36
1 Box	6 Monitor Stands						
100-01588	ThinkVision LT2252p	N/A	2572MB1	6V8ZD724	4y	N/A	N/A

100-01578	ThinkVision LT25252p		N/A	2572MB1	6V8ZC950	4y	N/A	N/A
100-01572	ThinkVision LT25252p		N/A	2572MB1	6V8ZD537	4y	N/A	N/A
100-01591	ThinkVision LT25252p		N/A	2572MB1	6V8ZD229	4y	N/A	N/A
1 Box	Keyboards & Mice 1 Set of Speakers Assorted Pwr/Network Cables							
100-00605	HP Z230 SFF PC		2015	T2A34US#ABA	2UA6010TB8	4y	12/17/2015	\$584.28
100-00571	HP Z230 SFF PC		2015	T2A34US#ABA	2UA6010T9W	4y	12/17/2015	\$584.28
100-00144	HP Z230 SFF PC		2015	F0K33UP#ABA	2UA5170SNM	4y	5/1/2015	\$795.42
100-00163	HP Z230 SFF PC		2015	F0K33UP#ABA	2UA5170SNW	4y	5/1/2015	\$795.42
100-00597	HP Z230 SFF PC		2015	T2A34US#ABA	2UA6010T7Q	4y	12/17/2015	\$584.28
100-00613	HP Z230 SFF PC		2015	T2A34US#ABA	2UA6010T9R	4y	12/17/2015	\$584.28
100-00620	HP Z230 SFF PC		2015	T2A34US#ABA	2UA6010T7B	4y	12/17/2015	\$584.28
100-00559	HP Z230 SFF PC		2015	T2A34US#ABA	2UA6010T88	4y	12/17/2015	\$584.28
100-00598	HP Z230 SFF PC		2015	T2A34US#ABA	2UA6010TB4	4y	12/17/2015	\$584.28
100-00650	HP Z230 SFF PC		2015	T2A34US#ABA	2UA6010T7Z	4y	12/17/2015	\$584.28
100-00607	HP Z230 SFF PC		2015	T2A34US#ABA	2UA6010T9F	4y	12/17/2015	\$584.28
100-00566	HP Z230 SFF PC		2015	T2A34US#ABA	2UA6010T7J	4y	12/17/2015	\$584.28
100-00600	HP Z230 SFF PC		2015	T2A34US#ABA	2UA6010TB6	4y	12/17/2015	\$584.28
1 Box	7 - Monitor Stands							
1 Box	7 - Monitor Stands							
100-03328	HP2205 LCD Monitor		N/A	LA2205wg	3CQ131N6DX	4y	N/A	N/A
100-03465	HP2205 LCD Monitor		N/A	LA2205wg	3CQ144BXXK1	4y	N/A	N/A
100-03364	HP2205 LCD Monitor		N/A	LA2205wg	3CQ144BXXKL	4y	N/A	N/A
100-03363	HP2205 LCD Monitor		N/A	LA2205wg	3CQ144BXLK	4y	N/A	N/A
100-03374	ThinkVision LT25252p		N/A	2572MB1	6V8ZC152	4y	N/A	N/A

1. User Department send to Finance Department

100-03491	ThinkVision LT2252p		N/A	2572MB1	6V1Z3328	4y	N/A	N/A
100-03494	HP2205 LCD Monitor		N/A	LA2205wg	3CQ144CVS2	4y	N/A	N/A
100-03365	HP2205 LCD Monitor		N/A	LA2205wg	3CQ144BXKF	4y	N/A	N/A
100-03490	ThinkVision LT2252p		N/A	2572MB1	6V1Z3335	4y	N/A	N/A
100-03349	HP2205 LCD Monitor		N/A	LA2205wg	3CQ144CVRX	4y	N/A	N/A
100-03205	HP2205 LCD Monitor		N/A	LA2205wg	3CQ131N585	4y	N/A	N/A
100-03369	HP2205 LCD Monitor		N/A	LA2205wg	3CQ144CVS7	4y	N/A	N/A
100-03496	HP2205 LCD Monitor		N/A	LA2205wg	3CQ144CVRQ	4y	N/A	N/A
100-02215	ThinkVision LT2252p		N/A	2572MB1	6V8ZHI98	4y	N/A	N/A
N/A	Nobilis CPU		2007	1279	961527	4y	8/1/2007	N/A
100-01711	Dell Laptop			Dell Latitude E6520	JRWRBS1			3/31/2012
100-02559	Monitor			LT1952pwd	V8HC456			
N/A	Switch (purchased by County for Record Center at the Caves)			Symbol ES 3000-PWR	00A0F868A696			
N/A	Wireless Switch (purchased by County for Record Center at the Caves)			Symbol WS 5100 RS	00a0f865bff6			7/15/2005
N/A	Wireless Switch (purchased by County for Record Center at the Caves)			Symbol WS 5100 12 port	00157025B6BF			11/10/2006
100-00640	HP Z230 SFF PC		2015	T2A34US#ABA	2UA6010T7R	4y	12/17/2015	\$584.28
N/A	Nobilis CPU		2006	Nobilis i274	821828	4y	7/1/2006	N/A
100-02848	E221 LCD Monitor		2014	C9V76A8#ABA	CNK4380KR7	4y	12/29/2014	\$161.00
22108	5 Port Dual Speed Hub		2002		LB5G1D0045467	4y	12/19/2002	N/A
38375	Jet Direct 170X		2005	J3258B	SG4B1AD42A	4y	2/7/2005	N/A
N/A	10Zig Client		N/A	YUJ130	00E0C54227B6	4y	N/A	N/A
100-00667	Lenovo Thinkpad W530		2013	2438-4KU	PK1DKAK	4y	10/11/2013	N/A

	N/A	Coby TFT LCD TV	1997	TFDVED2274	00909201089000367	4y	N/A	N/A
	100-00197	Lenovo Thinkpad W510	2010	4318CTO	R9A2VR1	4y	7/31/2010	N/A
	I Box	Assorted Keyboards/Docking Station/Monitor Stand						
	N/A	Back-up Power Supply (UPS)	N/A	Tripp-Lite AVR750U	2642.AVHOM879D02909	4y	N/A	N/A
	100-01289	HP2205 LCD Monitor	N/A	LA2205wg	3CQ144CVRN	4y	N/A	N/A
	100-00420	HP Z230 SFF PC	2015	T2A34US#ABA	2UA5492CRG	4y	11/18/2015	\$581.36
	100-01504	Lenovo Monitor	N/A	ThinkVision L2252 P	V8ZH193	4y	N/A	N/A
	100-00592	HP Z230 SFF PC	2015	T2A34US#ABA	2UA6010T9D	4y	12/17/2015	\$584.28
	100-00602	HP Z230 SFF PC	2015	T2A34US#ABA	2UA6010T8Z	4y	12/17/2015	\$584.28
	100-01293	HP2205 LCD Monitor	N/A	LA2205wg	3CQ144CVMG	4y	N/A	N/A
	100-01243	HP2205 LCD Monitor	N/A	LA2205wg	3CQ144CVR1	4y	N/A	N/A
	100-03502	HP2205 LCD Monitor	N/A	LA2205wg	3CQ144CVRM	4y	N/A	N/A
	100-00724	HP Z23i Monitor	2016	D7Q13A	3CQ5320DWB	4y	N/A	N/A
	100-03194	HP2205 LCD Monitor	N/A	LA2205wg	3CQ144BXXKX	4y	N/A	N/A
	100-03346	HP2205 LCD Monitor	N/A	LA2205wg	3CQ144CWC7	4y	N/A	N/A
	N/A	Xtreme On-line UPS	N/A	NXRT-1000	NX02131200088	5y	N/A	N/A
	100-03174	HP Laserjet 2200D	2003	C7058A	JPGGN38405	4y	2/14/2003	N/A
	100-00599	HP Z230 SFF PC	2015	T2A34US#ABA	2UA6010TBD	4y	12/17/2015	\$584.28
	100-00570	HP Z230 SFF PC	2015	T2A34US#ABA	2UA6010T8X	4y	12/17/2015	\$584.28
	100-00590	HP Z230 SFF PC	2015	T2A34US#ABA	2UA6010T9M	4y	12/17/2015	\$584.28
	100-00551	HP Z230 SFF PC	2015	T2A34US#ABA	2UA6010T7T	4y	12/17/2015	\$584.28
	100-02571	HP Z230 SFF PC	2014	DIP35AV	2UA3511FSP	4y	N/A	N/A
	100-00569	HP Z230 SFF PC	2015	T2A34US#ABA	2UA6010T9Q	4y	12/17/2015	\$584.28
	N/A	60" Vizio TV	2016	E600i-B3	LFTRPUBQ4100877	4y	N/A	N/A

	N/A	60" Vizio TV			2016	E600i-B3	LFTRPUBQ4100878	4y	N/A	N/A
	N/A	Nobilis CPU			2006	I274	813755	4y	6/1/2006	N/A
	100-02416	HP Z230 SFF PC			2014	DIP35AV	2UA3511FSL	4y	N/A	N/A
	100-03216	Sato Bar Code Printer			2003	CX 208	30200751	5y	7/8/2003	N/A
	100-03227	Sato Bar Code Printer			2001	CX 208	10300759	5y	4/23/2001	N/A
	100-03226	Sato Bar Code Printer			2005	Sato 400	50429415	5y	9/12/2005	N/A
	38612	HP Jet Direct 170X			2005	J3258C	SG5341523F	5y	10/5/2005	N/A
	23449	HP Jet Direct 170X			1999	J3258A	SG90553361	5y	9/1/1999	N/A
	27087	HP Jet Direct 170X			2002	J3258B	SG221A2FF8	5y	5/15/2002	N/A
	N/A	Avaya Phone			N/A	1608	N/A	5y	N/A	N/A
	38692	Toshiba External Floppy Drive			2005	PA3109U-3FDD	5327627731	4y	12/5/2005	N/A
	38697	Toshiba External Floppy Drive			2005	PA3109U-3FDD	5327625567	4y	12/5/2005	N/A
	22073	MiniView KVM Switch			2002	CS-142	03-270122LL0031	4y	2/19/2002	N/A
	N/A	IOGEAR 4-Port USB KVM Switch			2012	GCS634U	Z3CAH039B0U0078	4y	11/1/2012	N/A
	1 Box	2 - Printer Trays 6 - Keyboards 2 - Mice Assorted Power Cables								
	27027	small round end table			N/A				N/A	N/A
	1 Box	6 - Monitor Stands 2 - Keyboards 1 - Mouse Assorted Cables								
	27699	HP Jet Direct 170X			2003	J3258B	SG341AFBB1	4y	N/A	N/A
	100-02235	Back-up Power Supply (UPS)			2012	Smart750SLT	2141LLCSM519900244	5y	11/5/2012	N/A
	100-03774	ThinkVision LT 1952pwd Monitor			N/A	2448MB6	VDRG048	4y	N/A	N/A

100-01161	Fujitsu fi-6670		N/A	PA03576-B605	70048	5y	N/A	N/A
100-02634	HP Laserjet 4200		2004	4200	USGNM24227	4y	3/23/2004	N/A
100-02924	HP LA2205wg Monitor		N/A	LA2205wg	3CQ131N62M	4y	N/A	N/A
100-00760	ThinkVision LT2252p		N/A	2572MB1	6V8ZD638	4y	N/A	N/A

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.

** Refer to Asset Subclass Listing.



SURPLUS/TRANSFER DECLARATION FORM
JACKSON COUNTY, MISSOURI

-DO NOT DUPLICATE-

SURPLUS

TRANSFER

Date of Surplus: 6/24/19 Date Transfer Received: _____
 Department Name: Boats + Ra Department Code: _____
 Point of Contact: Brian Vandyke Phone Number: 503-4803
 Please Check: Surplus Transfer
 Receiving Department Contact: _____
 Receiving Department Phone Number: _____

Transaction Date	Fixed Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
		Tilt Skillet (4)			Green				
		Steamer (2)			Green				
		Microwave (1)		2006	G.E./SJM367DSK02				
		Mini Steamer (1)		2003	Green/HV-3E				
		PIZZA OVEN (4)			Lincoln/1116-000-VK-1997				
		Dubble Stack Oven (2)		2008	Green/Tri-DES 206				
		STAIR MASTER (1)			Nautilus				
		Chem MISO (1)		1996	Chery 16CEC14WSTZ	129854			
		Cushman Cart (1)			TAN 36V2PASS				
		Columbia Tug (1)			Columbia 12TE4-4ZHO177				

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.
 ** Refer to Asset Subclass Listing.

1. User Department send to Finance Department



SURPLUS/TRANSFER DECLARATION FORM
JACKSON COUNTY, MISSOURI
SURPLUS

-DO NOT DUPLICATE-

TRANSFER

Department Name: Legislature Department Code: 0112 Date Transfer Received:

Point of Contact: Cinoytoallano Phone Number: 816-881-3312 Department Transferring Asset:

Please Check: Surplus Transfer Receiving Department Contact: Receiving Department Phone Number:

Transaction Date	Fixed Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
		<u>DECL & T - non (1)</u>		<u>unknown</u>	<u>unknown</u>	<u>DECL 00 J365306462</u>	<u>unknown</u>	<u>unknown</u>	<u>unknown</u>
		<u>01610-276 Rep</u>							
		<u>none</u>							
		<u>19069 Brown Exec Desk (1)</u>							
		<u>00010465 Drawer w/ a pullout writing platforms</u>							
		<u>none</u>							
		<u>non - Rep fabric Task Chair w/ Arms - seat torn (1)</u>							
		<u>none</u>							
		<u>Catechareoal Gray Fabric w/ Black Arms / wheel Base</u>							
		<u>Exec Style chairs</u>							

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.
 ** Refer to Asset Subclass Listing.

1. User Department send to Finance Department
2. Purchasing Department send to Finance Department



SURPLUS/TRANSFER DECLARATION FORM

JACKSON COUNTY, MISSOURI

SURPLUS

Department Name: Court Services			Department Code:	Date Transfer
Point of Contact: Yvonne Fields			Phone Number: 816 881-3375	Department Re
Please Check: Select only one <input checked="" type="checkbox"/> Surplus <input type="checkbox"/> Transfer				Receiving Dep Receiving Dep

Transaction Date	Fixed Asset #	Asset Description	Disposition Code*	Model Year	Make/Model
12/17/2018	N/A	Oil Radiator Electric heater		unknown	
12/17/2018	N/A	Mini Refrigerator - Brown		unknown	
12/17/2018	N/A	2 - Curved wooden side chairs on casters		unknown	
12/17/2018	N/A	2- Arm Fabric high back side chairs		unknown	
12/17/2018	N/A	1 - Wooden arm side chair		unknown	
12/17/2018	N/A	Sound System boards		unknown	
12/17/2018	N/A	1 - Black / Chrome Bar stool		unknown	
12/17/2018	N/A	2 - Burgandy fabric arm chairs		unknown	

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.
 ** Refer to Asset Subclass Listing.



SURPLUS/TRANSFER DECLARATION FORM
JACKSON COUNTY, MISSOURI

-DO NOT DUPLICATE-

SURPLUS

TRANSFER

Department Name: COMBAT		Department Code: 4405	Date Transfer Received:
Point of Contact: CAROL		Phone Number: 1-1415	Department Transferring Asset:
Please Check: Select only one <input checked="" type="checkbox"/> Surplus <input type="checkbox"/> Transfer			Department Receiving Asset:
			Receiving Department Contact:
			Receiving Department Phone Number:

Transaction Date	Fixed Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
UNK		Desk		—				—	less
UNK		Chair		—					Chair
UNK		Chair		—					\$5000.00
UNK		Table		—					↓
UNK		File Cabinet		—					

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.
 ** Refer to Asset Subclass Listing.

1. User Department send to Finance Department
2. Purchasing Department send to Finance Department



SURPLUS/TRANSFER DECLARATION FORM

JACKSON COUNTY, MISSOURI

-DO NOT DUPLICATE-

SURPLUS

TRANSFER

Date of Surplus: 1-4-18
 Department Name: COLLECTIONS Department Code: 1403
 Point of Contact: KAREY Phone Number: 3038
 Please Check: Select only one
 Surplus Transfer
 Date Transfer Received:
 Department Transferring Asset:
 Department Receiving Asset:
 Receiving Department Contact:
 Receiving Department Phone Number:

Transaction Date	Fixed Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
1-4-18	5052	MONITOR	X		VIEWSONIC 19" LCD	PXU0639B5894		12-26-06	267.
	(Asset Mgmt shared with SWH)								
	an 5053								
	but unusable								
	an 5052								

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.
 ** Refer to Asset Subclass Listing.

1. User Department send to Finance Department
 cc IT
 cc coll



SURPLUS/TRANSFER DECLARATION FORM

JACKSON COUNTY, MISSOURI

-DO NOT DUPLICATE-

SURPLUS

Date of Surplus: 1-9-19
 Department Name: COLLECTIONS Department Code: 1403
 Point of Contact: VALENT Phone Number: 3038
 Please Check: Select only one
 Surplus Transfer

TRANSFER

Date Transfer Received:
 Department Transferring Asset:
 Department Receiving Asset:
 Receiving Department Contact:
 Receiving Department Phone Number:

Transaction Date	Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
1-9-19	4255	LT PRINTER	X SIM JUNK BUT NO JUNK WONT PRINT		HP L5 4255DN	CNDXH007F9		5-24-05	1140.

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.
 ** Refer to Asset Subclass Listing.

1. User Department send to Finance Department

cc IT
cc COU



SURPLUS/TRANSFER DECLARATION FORM JACKSON COUNTY, MISSOURI

-DO NOT DUPLICATE-

SURPLUS

TRANSFER

Date of Surplus: 3-5-19
 Department Name: COLLECTIONS Department Code: 1403
 Point of Contact: CAREY Phone Number: x3038
 Please Check: Surplus Transfer
 Receiving Department Contact:
 Receiving Department Phone Number:

Transaction Date	Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
	3857	17" FLAT SCREEN MONITOR	X		VIEWSONIC VEH166	P1004461128		REPLACEMENT FOR DEFECTIVE PICO 4450010	0214 PURCH 3-1-05 \$286
		ORIG. ASSIGNER AND NEW # GIVEN TO DEPARTMENT						ASVD REVL 2-5-08	RETURNED 10-31-07

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.
 ** Refer to Asset Subclass Listing.
 1. User Department send to Finance Department
 CC IT
 CC COLL



SURPLUS/TRANSFER DECLARATION FORM

JACKSON COUNTY, MISSOURI

-DO NOT DUPLICATE-

SURPLUS

TRANSFER

Date of Surplus: 6-11-18 Date Transfer Received: _____

Department Name: COLLECTIONS Department Code: 1403 Department Transferring Asset: _____

Point of Contact: KALEY Phone Number: 3028 Department Receiving Asset: _____

Please Check: Select only one
 Surplus Transfer
 Receiving Department Contact: _____ Receiving Department Phone Number: _____

Transaction Date	Fixed Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
	6000552	AVAYA 1608i IP PHONE	X	NO DISPLAY	AVAYA 1608i	14WZ287902LP	3 Yrs	17-2-18	\$145.52
	9343648	AVAYA 1608i IP PHONE RETURNS	X	NO POWER, DEMO	AVAYA 1608i	09WZ34353069	?	?	?

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.
 ** Refer to Asset Subclass Listing.

1. User Department send to Finance Department



SURPLUS/TRANSFER DECLARATION FORM

JACKSON COUNTY, MISSOURI

-DO NOT DUPLICATE-

SURPLUS

TRANSFER

Department Name: Jackson Co Pros 11th FL		Department Code: 4101	Date Transfer Received:	
Point of Contact: Gina Robinson		Phone Number: 881-3369	Department Transferring Asset:	
Please Check: Select only one		<input type="checkbox"/> Transfer	Department Receiving Asset:	
<input checked="" type="checkbox"/> Surplus			Receiving Department Contact:	
			Receiving Department Phone Number:	

Transaction Date	Fixed Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
		Black entertainment center/cabinet- Cailin Brock's office				M89P35			
		Black 2 drawer filing cabinet& items on top - next to coffee maker							
		Wood filing cabinet-Patrick Accurso office				11019			
		Wire floor stand- Eastside hallway cut through							
		Black Clock- Joe Van Amburg office							
		File tray- Joe Van Amburg office							
		Black Hon filing cabinet- Joe Van Amburg office							
		Brown bookcase- Joe Van Amburg office				MW171			
		Brown table- Joe Van Amburg office				411			
		Black chair (non rolling)- Joe Van Amburg office				CJXC7R			
		Large dry erase board- Joe Van Amburg office							
		5 Missouri Practice Series books- Joe Van Amburg office							
		Gray/ Black desk- Westside bullpen							
		Two black chairs (non rolling)- Westside bullpen							

1. User Department send to Finance Department
2. Purchasing Department send to Finance Department



SURPLUS/TRANSFER DECLARATION FORM

JACKSON COUNTY, MISSOURI

-DO NOT DUPLICATE-

TRANSFER

Department Name: Prosecutor's Office		Department Code: 4101	Date Transfer Received:	
Point of Contact: Gina Robinson		Phone Number: 881-3369	Department Transferring Asset:	
Please Check: Select only one		Department Receiving Asset:		
<input checked="" type="checkbox"/> Surplus <input type="checkbox"/> Transfer		Receiving Department Contact:		
		Receiving Department Phone Number:		

Transaction Date	Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
		Cabinet - black							
		File cabinet - tan - 4 drawer							
		File cabinet - black - 4 drawer							
		File cabinet - black - 2 drawer							
		Bookcase - wood							
		Desk - wood							
		Desk - tan							
		Desk - tan							
		Desk - black							
		Table - tan/woodtone							
		Bookcase - woodtone							

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.
 ** Refer to Asset Subclass Listing.
 1. User Department send to Finance Department
 2. Purchasing Department send to Finance Department



SURPLUS/TRANSFER DECLARATION FORM

JACKSON COUNTY, MISSOURI

-DO NOT DUPLICATE-

SURPLUS

TRANSFER

Department Name: Prosecutor's Office		Department Code: 4101	Date Transfer Received:	
Point of Contact: Gina Robinson		Phone Number: 881-3369	Department Transferring Asset:	
Please Check: <input type="checkbox"/> Surplus <input type="checkbox"/> Transfer		Department Receiving Asset:		
		Receiving Department Contact:		
		Receiving Department Phone Number:		

Transaction Date	Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
		Miscellaneous cables							
		Avaya phone							
		Vaultz case - black							
		Labtech speakers							
		HP LaserJet Pro 400							
		HP Officejet Pro 8600 plus							
		HP LaserJet 500 color							
		HP color LaserJet 4650dn							
		HP ScanJet 8270							
		FireWire 800/USB 2.0							
		Toner Cartridge -HP CE400X - black - 2							
		Toner Cartridge -HP CE403A - magenta - 3							
		Toner Cartridge - HP CE401A - cyan - 1							

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.
 ** Refer to Asset Subclass Listing.
 1. User Department send to Finance Department
 2. Purchasing Department send to Finance Department

SURPLUS/TRANSFER DECLARATION FORM
JACKSON COUNTY, MISSOURI

SURPLUS

TRANSFER

Date of Surplus: _____ Date Transfer Received: _____
 Department Name: CORRECTIONS Department Code: 2701 Department Transferring Asset: _____
 Point of Contact: CRAIG MAYER Phone Number: 816-873-9362 Department Receiving Asset: _____
 Please Check: Select only one Receiving Department Contact: _____
 Surplus Transfer Receiving Department Phone Number: _____

Transaction Date	Fixed Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
		STACKING CHAIRS (21)				Unkown		Unkown	
		OFFICE CHAIRS (39)							
		CUBICLE FURNITURE PARTS							
		COFFEE MAKER (1)							
		CARBONAD TUBES (5)							
		S.C.B.A. STORAGE CABINET (3)							
		BOX/BAG OLD CLOTHES (67)							
		4 DRAWER FILE CABINET (10)							
		5 DRAWER FILE CABINET (1)							
		3 DRAWER LATERAL FILE (1)							
		DESK (8)							
		UPPER WALL CABINET (10)							
		TABLE (3)							
		BBO GRILL (1)							

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.
 ** Refer to Asset Subclass Listing.

3rd Floor Annex



SURPLUS/TRANSFER DECLARATION FORM

JACKSON COUNTY, MISSOURI

-DO NOT DUPLICATE-

SURPLUS

TRANSFER

Date of Surplus:		Date Transfer Received:							
Department Name: <i>Correctional</i>	Department Code: <i>2701</i>	Department Transferring Asset:							
Point of Contact: <i>Cerie Nothme</i>	Phone Number: <i>816-813-9362</i>	Department Receiving Asset:							
Please Check: Select only one		Receiving Department Contact:							
<input checked="" type="checkbox"/> Surplus		Receiving Department Phone Number:							
<input type="checkbox"/> Transfer									
Transaction Date	Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
		<i>BAGS WALL CABINET</i>	<i>(1)</i>			<i>UNKNOWN</i>		<i>UNKNOWN</i>	
		<i>RIOT HELMET, BAG</i>	<i>(2)</i>						
		<i>BIO-HAZARD CONTAINER</i>	<i>(2)</i>						
		<i>SHOP VAC (1)</i>							
		<i>PALLETS (25)</i>							

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.
 ** Refer to Asset Subclass Listing.

3rd Floor Annex
4 or 5

1. User Department send to Finance Department



SURPLUS/TRANSFER DECLARATION FORM

JACKSON COUNTY, MISSOURI

-DO NOT DUPLICATE-

SURPLUS

TRANSFER

Date of Surplus: _____ Date Transfer Received: _____

Department Name: CORRECTIONS Department Code: 2701 Department Transferring Asset: _____

Point of Contact: CECIL MATHEN Phone Number: 816-813-9362 Department Receiving Asset: _____

Please Check: Select only one Surplus Transfer Receiving Department Contact: _____

Receiving Department Phone Number: _____

Transaction Date	Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
		PROPANE TANK (1)	(1)			UNKNOWN		UNKNOWN	
		MAIL BOX CABINET	(8)						
		DESK RETURNS	(6)						
		EXERCISE MAT	(17)						
		SHELVING UNIT	(2)						
		BULLETIN BOARD	(4)						
		BALLISTIC GLASS (1)							
		TEMPORARY PARTITION PANELS	(9)						
		COUNTERTOP (2)							
		BOX OF RADIO/CHARGERS	(16)						
		TV STAND (1)							
		DISPLAY BOARDS (23)							
		PROJECTOR SCREEN (1)							
		END TABLE (1)							

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.
 ** Refer to Asset Subclass Listing.

SEE Floor Annex

1 of 5



SURPLUS/TRANSFER DECLARATION FORM
JACKSON COUNTY, MISSOURI
SURPLUS

-DO NOT DUPLICATE-

TRANSFER

Date of Surplus: _____ Date Transfer Received: _____
 Department Name: CORRECTIVE Department Code: 2701 Department Transferring Asset: _____
 Point of Contact: Chris Niska Phone Number: 816-813-9362 Department Receiving Asset: _____
 Please Check: Select only one Surplus Transfer Receiving Department Contact: _____
 Receiving Department Phone Number: _____

Transaction Date	Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
		TIME CLOCK (2)				UNKNOWN		UNKNOWN	
		4 DRAWER LATERAL FILE	(5)						
		DISPLAY CASE (1)							
		2 DRAWER LATERAL FILE	(1)						
		UPRIGHT STORAGE DRAWING	(2)						
		2 DRAWER FILE CABINET	(2)						
		TABLE TOP (6)							
		TABLE SUPPORTS (3)							
		FLOOR MATS (25)							
		BRIDGE CHAIR SEATS (2)							
		S.C.B.A TANK (32)							
		S.C.B.A FIREMARK (32)							
		HOLIDAY DECORATION BOX	(8)						
		SCBA Harness (32)							

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.
 ** Refer to Asset Subclass Listing.

3rd Floor Annex

2 of 5

1. User Department send to Finance Department



SURPLUS/TRANSFER DECLARATION FORM

JACKSON COUNTY, MISSOURI

-DO NOT DUPLICATE-

SURPLUS

TRANSFER

Department Name: Prosecutor's Office		Department Code: 4101	Date Transfer Received:	
Point of Contact: Gina Robinson		Phone Number: 881-3369	Department Transferring Asset:	
Please Check: Select only one		Department Receiving Asset:		
<input checked="" type="checkbox"/> Surplus		Receiving Department Contact:		
<input type="checkbox"/> Transfer		Receiving Department Phone Number:		

Transaction Date	Fixed Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
		Cabinet - tan							
		Cabinet - woodtone							
		Cabinet - woodtone							
		Square table - white							
		Square table - white							
		Square table - white							
		Square table - white							
		Bookcase - black							
		Bookcase - black							
		Bookcase - woodtone							
		Standing Fan							
		TV stand - black							
		Table - brown							
		Cork board							
		Dry erase board							
		Panasonic TV							

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.

** Refer to Asset Subclass Listing.

1. User Department send to Finance Department
2. Purchasing Department send to Finance Department



SURPLUS/TRANSFER DECLARATION FORM
JACKSON COUNTY, MISSOURI
SURPLUS

-DO NOT DUPLICATE-

TRANSFER

Date of Surplus: 05/08/2019
 Department Name: Assessment Department Code: 1902
 Point of Contact: Eric Rabe Phone Number: 881-3238
 Please Check: Select only one
 Surplus Transfer
 Receiving Department Contact:
 Receiving Department Phone Number:

Transaction Date	Fixed Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
5/8/2019	None	File Vault	0						
5/8/2019	None	Table	0						
5/8/2019	None	2 drawer filing cabinet	0						
5/8/2019	None	Office desk	0						
5/8/2019	None	Office desk	0						
5/8/2019	None	Small Fridge	0						
5/8/2019	None	paper shredder	0						
5/8/2019	9716	Large format printer	0		HP-CM766a	MY98E09011			
5/8/2019	None	5 drawer filing cabinet	0						

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.
 ** Refer to Asset Subclass Listing.

1. User Department send to Finance Department



SURPLUS/TRANSFER DECLARATION FORM

JACKSON COUNTY, MISSOURI

SURPLUS

TRANSFER

-DO NOT DUPLICATE-

Date of Surplus: 05/08/2019		Department Code: 1902		Date Transfer Received:					
Department Name: Assessment		Phone Number: 881-3238		Department Transferring Asset: Assessment					
Point of Contact: Eric Rabe		<input checked="" type="checkbox"/> Transfer <input type="checkbox"/> Surplus		Department Receiving Asset: Recorder of Deeds					
Please Check: Select only one				Receiving Department Contact: Sandra Custard					
		Receiving Department Phone Number: 816-881-3191							
Transaction Date	Fixed Asset #	Disposition Asset Description	Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
5/8/2019	None	4 drawer filing cabinet	0						
5/8/2019	None	4 drawer filing cabinet	0						
5/8/2019	None	4 drawer filing cabinet	0						
5/8/2019	None	4 drawer filing cabinet	0						
5/8/2019	None	4 drawer filing cabinet	0						
5/8/2019	None	5 drawer filing cabinet	0						
5/8/2019	None	5 drawer filing cabinet	0						

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.

** Refer to Asset Subclass Listing.

1. User Department send to Finance Department



SURPLUS/TRANSFER DECLARATION FORM

JACKSON COUNTY, MISSOURI

-DO NOT DUPLICATE-

TRANSFER

SURPLUS

4/12/2019

Date Transfer Received: _____

Department Name: Family Support Division Department Code: 4103 Department Transferring Asset: _____

Point of Contact: Daniel Hefley Phone Number: 365-0561 or 881-3997 Department Receiving Asset: _____

Please Check: Select only one Receiving Department Contact: _____

Surplus Transfer Receiving Department Phone Number: _____

Transaction Date	Fixed Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
10/11/2018		Box of 17 Soundbars for 1905FP		2005			5	1/23/2005	
11/1/2018		IOGear KVM PS2 Keyboard/Mouse Switchbo			GCS84A	01-2B0221BL0371	5	6/25/1905	est 110.00
4/12/2019		Small Conference Table		2008	UFM2060	CJX7AM	5		
4/12/2019		Medium Table							
4/12/2019		Office Desk 30x60							
4/12/2019		Blue Office Chair			TR-HMM	CTYC7R	5		
4/12/2019		Blue Office Chair			TR-HMM	3NXXEL	5		

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.
 ** Refer to Asset Subclass Listing.



SURPLUS/TRANSFER DECLARATION FORM

JACKSON COUNTY, MISSOURI

SURPLUS

-DO NOT DUPLICATE-

TRANSFER

12/20/2018		Date Transfer Received:							
Department Name: Family Support Division		Department Code: 4103							
Point of Contact: Daniel Hefley		Phone Number: 365-0561 or 881-3997							
Please Check: Select only one									
<input checked="" type="checkbox"/> Surplus		<input type="checkbox"/> Transfer							
Receiving Department Contact:		Receiving Department Phone Number:							
Transaction Date	Fixed Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
12/20/2018		Avaya 1608 Telephone		2009	1608	09WZ34050660	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	11WZ343502X0	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	09WZ34050647	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	09WZ34352776	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	09WZ34050741	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	09WZ34050425	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	09WZ34050730	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	09WZ35251654	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	09WZ34050734	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	09WZ28350697	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	09WZ34050816	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	09WZ34050855	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	09WZ30450997	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	09WZ43450084	5	12/28/2009	105.00

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.
 ** Refer to Asset Subclass Listing.



SURPLUS/TRANSFER DECLARATION FORM

JACKSON COUNTY, MISSOURI

-DO NOT DUPLICATE-

SURPLUS

TRANSFER

12/20/2018		Date Transfer Received:							
Department Name: Family Support Division		Department Code: 4103							
Point of Contact: Daniel Hefley		Phone Number: 365-0561 or 881-3997							
Please Check: Select only one									
<input checked="" type="checkbox"/> Surplus		<input type="checkbox"/> Transfer							
Receiving Department Phone Number:		Serial/Vin Number							
Transaction Date	Fixed Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV11005856	5	12/28/2009	75.00
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV11002708	5	12/28/2009	75.00
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV11003779	5	12/28/2009	75.00
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV11007098	5	12/28/2009	75.00
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV11007007	5	12/28/2009	75.00
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV09001594	5	12/28/2009	75.00
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV11002703	5	12/28/2009	75.00
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV09001599	5	12/28/2009	75.00
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV11002717	5	12/28/2009	75.00
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV11002718	5	12/28/2009	75.00
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV11005859	5	12/28/2009	75.00
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV09000492	5	12/28/2009	75.00
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV11002704	5	12/28/2009	75.00
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV11002709	5	12/28/2009	75.00

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.

** Refer to Asset Subclass Listing.

1. User Department send to Finance Department



SURPLUS/TRANSFER DECLARATION FORM

JACKSON COUNTY, MISSOURI

SURPLUS

-DO NOT DUPLICATE-

TRANSFER

Date of Surplus:	10/19/2018			Date Transfer Received:			
Department Name:	Family Support Division Department Code: 4103			Department Transferring Asset:			
Point of Contact:	Daniel Hefley Phone Number: 816-365-0561			Department Receiving Asset:			
Please Check: Select only one				Receiving Department Contact:			
<input checked="" type="checkbox"/> Surplus <input type="checkbox"/> Transfer				Receiving Department Phone Number:			

Transaction Date	Fixed Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
10/16/2018	10205	Dell Optiplex 790 Mini Tower		-	Optiplex 790	CTVXYQ1	5	7/19/2011	\$777.00
10/16/2018	10206	Dell Optiplex 790 Mini Tower		-	Optiplex 790	CTVYYQ1	5	7/19/2011	\$777.00
10/16/2018	10207	Dell Optiplex 790 Mini Tower		-	Optiplex 790	CTVZYQ1	5	7/19/2011	\$777.00
10/16/2018	10208	Dell Optiplex 790 Mini Tower		-	Optiplex 790	CTWTYQ1	5	7/19/2011	\$777.00
10/16/2018	10209	Dell Optiplex 790 Mini Tower		-	Optiplex 790	CTWVYQ1	5	7/19/2011	\$777.00
10/16/2018	10210	Dell Optiplex 790 Mini Tower		-	Optiplex 790	CTWVYQ1	5	7/19/2011	\$777.00
10/16/2018	10211	Dell Optiplex 790 Mini Tower		-	Optiplex 790	CTWXYQ1	5	7/19/2011	\$777.00
10/16/2018	10212	Dell Optiplex 790 Mini Tower		-	Optiplex 790	CTWVYQ1	5	7/19/2011	\$777.00
10/16/2018	10213	Dell Optiplex 790 Mini Tower		-	Optiplex 790	CTWZYQ1	5	7/19/2011	\$777.00
10/16/2018	10214	Dell Optiplex 790 Mini Tower		-	Optiplex 790	CTXTYQ1	5	7/19/2011	\$777.00
10/16/2018	10216	Dell Optiplex 790 Mini Tower		-	Optiplex 790	CTXWYQ1	5	7/19/2011	\$777.00
10/16/2018	10217	Dell Optiplex 790 Mini Tower		-	Optiplex 790	CTXXYQ1	5	7/19/2011	\$777.00
10/16/2018	10218	Dell Optiplex 790 Mini Tower		-	Optiplex 790	CTXYYQ1	5	7/19/2011	\$777.00
10/16/2018	10219	Dell Optiplex 790 Mini Tower		-	Optiplex 790	CTXZYQ1	5	7/19/2011	\$777.00

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.
 ** Refer to Asset Subclass Listing.

1. User Department send to Finance Department



SURPLUS/TRANSFER DECLARATION FORM

JACKSON COUNTY, MISSOURI

SURPLUS

-DO NOT DUPLICATE-

TRANSFER

Date of Surplus: 10/19/2018
 Department Name: Family Support Division Department Code: 4103
 Point of Contact: Daniel Hefley Phone Number: 816-365-0561
 Please Check: Select only one
 Surplus Transfer
 Receiving Department Contact
 Receiving Department Phone Number:

Transaction Date	Fixed Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
10/16/2018	10220	Dell Optiplex 790 Mini Tower			Optiplex 790	CTYYQ1	5	7/19/2011	\$777.00
10/16/2018	10221	Dell Optiplex 790 Mini Tower			Optiplex 790	CTYYQ1	5	7/19/2011	\$777.00
10/16/2018	10222	Dell Optiplex 790 Mini Tower			Optiplex 790	CTYYQ1	5	7/19/2011	\$777.00
10/16/2018	10224	Dell Optiplex 790 Mini Tower			Optiplex 790	CTYYQ1	5	7/19/2011	\$777.00
10/16/2018	10225	Dell Optiplex 790 Mini Tower			Optiplex 790	CTZYQ1	5	7/19/2011	\$777.00
10/16/2018	10227	Dell Optiplex 790 Mini Tower			Optiplex 790	CTZYQ1	5	7/19/2011	\$777.00
10/16/2018	10228	Dell Optiplex 790 Mini Tower			Optiplex 790	CTZYQ1	5	7/19/2011	\$777.00
10/16/2018	009148	Dell 19 inch UltraSharp 1905FP Flat			1905FP	CN-0T616-71618-4BR-A75	5	1/20/2005	\$476.10
10/16/2018	009150	Dell 19 inch UltraSharp 1905FP Flat			1905FP	CN-0T616-71618-4BR-A75	5	1/20/2005	\$476.10
10/16/2018	009152	Dell 19 inch UltraSharp 1905FP Flat			1905FP	CN-0T616-71618-4BR-A76	5	1/20/2005	\$476.10
10/16/2018	009161	Dell 19 inch UltraSharp 1905FP Flat			1905FP	CN-0T616-71618-4BR-A76	5	1/20/2005	\$476.10
10/16/2018	009155	Dell 19 inch UltraSharp 1905FP Flat			1905FP	CN-0T616-71618-4BR-A77	5	1/20/2005	\$476.10
10/16/2018	009169	Dell 19 inch UltraSharp 1905FP Flat			1905FP	CN-0T616-71618-4BR-AEGE	5	1/20/2005	\$476.10
10/16/2018	10374	Fujitsu fi-6130Z Sheetfedj USB Sca			FI-6130Z	606415	5	12/3/2012	\$855.58

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.
 ** Refer to Asset Subclass Listing.

1. User Department send to Finance Department



SURPLUS/TRANSFER DECLARATION FORM

JACKSON COUNTY, MISSOURI

SURPLUS

-DO NOT DUPLICATE-

TRANSFER

12/20/2018		Date Transfer Received:							
Department Name: Family Support Division		Department Code: 4103							
Point of Contact: Daniel Hefley		Phone Number: 365-0561 or 881-3997							
Please Check: Select only one									
<input checked="" type="checkbox"/> Surplus		<input type="checkbox"/> Transfer							
Receiving Department Contact:		Receiving Department Phone Number:							
Transaction Date	Fixed Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
10/11/2018		Avaya 1608 Telephone		2009	1608	09WZ34050721	5	12/28/2009	105.00
10/11/2018		Avaya 1608 Telephone		2009	1608	09WZ35251609	5	12/28/2009	105.00
10/11/2018		Avaya 1608 Telephone		2009	1608	09WZ34050657	5	12/28/2009	105.00
10/11/2018		Avaya 1608 Telephone		2009	1608	07A7510713454	5	12/28/2009	105.00
10/11/2018		Avaya 1608 Telephone		2009	1608	09WZ34050729	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	09WZ34050763	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	09WZ34352759	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	09WZ34050658	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	09WZ30551172	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	09WZ34050862	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	09WZ34050651	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	12WZ1626038X	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	12WZ161600AS	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	09WZ34050742	5	12/28/2009	105.00

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.

** Refer to Asset Subclass Listing.



SURPLUS/TRANSFER DECLARATION FORM

JACKSON COUNTY, MISSOURI

SURPLUS

-DO NOT DUPLICATE-

TRANSFER

12/20/2018		Date Transfer Received:							
Department Name: Family Support Division		Department Code: 4103							
Point of Contact: Daniel Hefley		Phone Number: 365-0561 or 881-3997							
Please Check: Select only one									
<input checked="" type="checkbox"/> Surplus		<input type="checkbox"/> Transfer							
Receiving Department Contact:		Receiving Department Phone Number:							
Transaction Date	Fixed Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
12/20/2018		Avaya 1608 Telephone		2009	1608	13WZ213706DZ	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	09WZ34352729	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	09WZ35251571	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	09WZ34050702	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	13WZ213706CV	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	09WZ30551093	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	12WZ1656062W	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	09WZ35251563	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	09WZ34050838	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	09WZ34352761	5	12/28/2009	105.00
12/20/2018		Avaya 1608 Telephone		2009	1608	09WZ34050825	5	12/28/2009	105.00
12/20/2018		Avaya 1616 Telephone		2009	1616	09A725080275	5	12/28/2009	138.00
12/20/2018		Avaya 1616 Telephone		2009	1616	09A726280077	5	12/28/2009	138.00
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV11007086	5	12/28/2009	75.00

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.
 ** Refer to Asset Subclass Listing.



SURPLUS/TRANSFER DECLARATION FORM

JACKSON COUNTY, MISSOURI

-DO NOT DUPLICATE-

SURPLUS TRANSFER

Date Transfer Received:		Date Transfer Received:							
Department Name: Family Support Division Department Code: 4103		Department Transferring Asset:							
Point of Contact: Daniel Hefley Phone Number: 365-0561 or 881-3997		Department Receiving Asset:							
Please Check: Select only one		Receiving Department Contact:							
<input checked="" type="checkbox"/> Surplus		Receiving Department Phone Number:							
<input type="checkbox"/> Transfer									
Transaction Date	Fixed Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV11002710	5	12/28/2009	75.00
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV09001600	5	12/28/2009	75.00
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV11007127	5	12/28/2009	75.00
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV11007008	5	12/28/2009	75.00
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV11002707	5	12/28/2009	75.00
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV11002716	5	12/28/2009	75.00
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV09000488	5	12/28/2009	75.00
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV11002720	5	12/28/2009	75.00
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV09001323	5	12/28/2009	75.00
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV09001595	5	12/28/2009	75.00
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV11000119	5	12/28/2009	75.00
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV11002719	5	12/28/2009	75.00
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV11007006	5	12/28/2009	75.00
12/20/2018		Avaya Gigabit Ethernet Adapter		2009	700416985	S09IV09002098	5	12/28/2009	75.00

* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other.

** Refer to Asset Subclass Listing.

REQUEST FOR LEGISLATIVE ACTION

Version 6/10/19

Completed by County Counselor's Office:

Res/Ord No.: 20213

Sponsor(s): Crystal Williams

Date: August 5, 2019

JUL 24 2019

<p>SUBJECT</p>	<p>Action Requested <input type="checkbox"/> Resolution <input type="checkbox"/> Ordinance</p> <p>Project/Title: Declaring certain personal property as Surplus and authorizing its disposal or transfer pursuant to Chapter 11 of the Jackson County Code.</p>										
<p>BUDGET INFORMATION <i>To be completed By Requesting Department and Finance</i></p>	<table border="1"> <tr> <td>Amount authorized by this legislation this fiscal year:</td> <td style="text-align: right;">\$</td> </tr> <tr> <td>Amount previously authorized this fiscal year:</td> <td></td> </tr> <tr> <td>Total amount authorized after this legislative action:</td> <td style="text-align: right;">\$</td> </tr> <tr> <td>Amount budgeted for this item * (including transfers):</td> <td style="text-align: right;">\$</td> </tr> <tr> <td>Source of funding (name of fund) and account code number:</td> <td style="text-align: right;">\$</td> </tr> </table> <p>* If account includes additional funds for other expenses, total budgeted in the account is: \$</p> <p>OTHER FINANCIAL INFORMATION:</p> <p><input checked="" type="checkbox"/> No budget impact (no fiscal note required) <input type="checkbox"/> Term and Supply Contract (funds approved in the annual budget); estimated value and use of contract: Department: _____ Estimated Use: _____</p> <p>Prior Year Budget (if applicable): _____ Prior Year Actual Amount Spent (if applicable): _____</p>	Amount authorized by this legislation this fiscal year:	\$	Amount previously authorized this fiscal year:		Total amount authorized after this legislative action:	\$	Amount budgeted for this item * (including transfers):	\$	Source of funding (name of fund) and account code number:	\$
Amount authorized by this legislation this fiscal year:	\$										
Amount previously authorized this fiscal year:											
Total amount authorized after this legislative action:	\$										
Amount budgeted for this item * (including transfers):	\$										
Source of funding (name of fund) and account code number:	\$										
<p>PRIOR LEGISLATION</p>	<p>Prior ordinances and (date): _____ Prior resolutions and (date): _____</p>										
<p>CONTACT INFORMATION</p>	<p>RLA drafted by (name, title, & phone): Katie Bartle, Senior Buyer, 816-881-3465</p>										
<p>REQUEST SUMMARY</p>	<p>Various County Departments and the Courts have requested that certain personal property be declared as Surplus and the disposal or transfer of that property be authorized.</p> <p>Recommended disposal of declared property is as follows: Attachment A Transfer of vehicles from the Sheriff's Office to Parks + Rec Attachment B Due to a clerical error, this sheet was missed in a previous RLA. These vehicles have already been sold at auction. The remainder of the items will be sold at auction.</p> <p>The Purchasing Department recommends the unusable personal property on the attached Surplus Declaration Forms be declared surplus and unusable and disposed of or transferred pursuant to Chapter 11 of the Jackson County Code. All proceeds will be credited to the General Fund pursuant to Chapter 5, Section 535.2 of the Jackson County Code.</p>										
<p>CLEARANCE</p>	<p><input type="checkbox"/> Tax Clearance Completed (Purchasing & Department) N/A <input type="checkbox"/> Business License Verified (Purchasing & Department) N/A <input type="checkbox"/> Chapter 6 Compliance - Affirmative Action/Prevailing Wage (County Auditor's Office) N/A</p>										
<p>COMPLIANCE</p>	<p><input type="checkbox"/> MBE Goals <input type="checkbox"/> WBE Goals N/A <input type="checkbox"/> VBE Goals</p>										
<p>ATTACHMENTS</p>	<p>Surplus Declaration Forms from County Departments and the Courts.</p>										

REVIEW	Department Director: <i>Bob Custer</i>	Date: 7-23-2019
	Finance (Budget Approval): <i>If applicable</i>	Date: 7/24/19
	Division Manager: <i>J. M. Smith</i>	Date: 7/25/19
	County Counselor's Office: <i>Bryan Canino</i>	Date: 7/30/19

Fiscal Information (to be verified by Budget Office in Finance Department)

- This expenditure was included in the annual budget.
- Funds for this were encumbered from the _____ Fund in _____.
- There is a balance otherwise unencumbered to the credit of the appropriation to which the expenditure is chargeable and there is a cash balance otherwise unencumbered in the treasury to the credit of the fund from which payment is to be made each sufficient to provide for the obligation herein authorized.
- Funds sufficient for this expenditure will be/were appropriated by Ordinance # _____
- Funds sufficient for this appropriation are available from the source indicated below.

Account Number:	Account Title:	Amount Not to Exceed:

- This award is made on a need basis and does not obligate Jackson County to pay any specific amount. The availability of funds for specific purchases will, of necessity, be determined as each using agency places its order.
- This legislative action does not impact the County financially and does not require Finance/Budget approval.

IN THE COUNTY LEGISLATURE OF JACKSON COUNTY, MISSOURI

A RESOLUTION awarding a contract for the development of a GIS strategic plan for use by the Information Technology Department to Pro West Associates of Walker, MN, under the terms and conditions of United States GSA Contract No. 47QTCA18D00AS, an existing government contract, at an actual cost to the County not to exceed \$54,548.72.

RESOLUTION NO. 20214, August 5, 2019

INTRODUCED BY Crystal Williams, County Legislator

WHEREAS, the County has a need to update its current GIS enterprise system; and,

WHEREAS, the Information Technology Department recommends an assessment and implementation plan be completed county-wide in order to support current and future enterprise Geographic Information Systems (GIS) operations; and,

WHEREAS, system architecture and special data models, as well as the enterprise solution, will need updating in order to meet the future demand of the enterprise GIS; and,

WHEREAS, the need for existing and future GIS growth and operation is imperative; and,

WHEREAS, specialized services to help direct and guide GIS to meet the current and future needs of the County is a top priority; and,

WHEREAS, pursuant to Section 1030.2 of the Jackson County Code, the Director of Finance and Purchasing recommends the award of a contract for the development of a GIS strategic plan to Pro West Associates of Walker, MN, under the terms and conditions

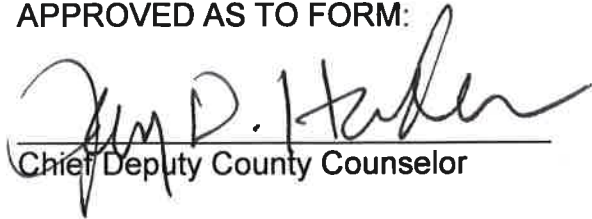
set forth in the United States Contract No. 47QTCA18D00AS, at an actual cost to the County not to exceed \$54,548.72; now therefore,

BE IT RESOLVED by the County Legislature of Jackson County, Missouri, that an award be made as recommended by the Department of Finance and Purchasing, and that the Department of Finance and Purchasing be, and is hereby, authorized to execute for the County any documents necessary to the accomplishment of the award; and,

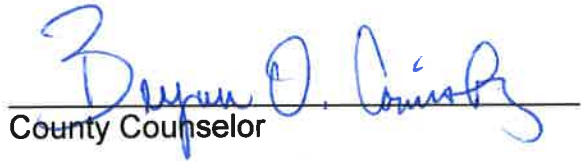
BE IT FURTHER RESOLVED that the Department of Finance and Purchasing is authorized to make all payments, including final payment on the contract.

Effective Date: This Resolution shall be effective immediately upon its passage by a majority of the Legislature.

APPROVED AS TO FORM:



Chief Deputy County Counselor



County Counselor

Certificate of Passage

I hereby certify that the attached resolution, Resolution No. 20214 of August 5, 2019 of was duly passed on _____, 2019 by the Jackson County Legislature. The votes thereon were as follows:

Yeas _____ Nays _____
Abstaining _____ Absent _____

Date

Mary Jo Spino, Clerk of Legislature

There is a balance otherwise unencumbered to the credit of the appropriation to which the expenditure is chargeable and there is a cash balance otherwise unencumbered in the treasury to the credit of the fund from which payment is to be made each sufficient to provide for the obligation herein authorized.

ACCOUNT NUMBER: 001 1305 56790
ACCOUNT TITLE: General Fund
Information Technology
Other Contractual Services
NOT TO EXCEED: \$54,549.00

7/31/19

Date



Chief Administrative Officer

REQUEST FOR LEGISLATIVE ACTION

JUL 24 2019

Completed by County Counselor's Office:

Res/Ord No.: 20214

Sponsor(s): Crystal Williams

Date: August 5, 2019

<p>SUBJECT</p>	<p>Action Requested <input checked="" type="checkbox"/> Resolution <input type="checkbox"/> Ordinance</p> <p>Project/Title: <u>Authorizing the Creation of a GIS Strategic Plan for Jackson County by Pro West under GSA Contract 47QTCA18D00AS. This is needed to guide the County GIS to meet current and future needs. This will identify needs of each department and allow GIS staff to serve the needs of each department to the full extent of their ability</u></p>										
<p>BUDGET INFORMATION <i>To be completed By Requesting Department and Finance</i></p>	<table border="1"> <tr> <td>Amount authorized by this legislation this fiscal year:</td> <td>\$54,548.72</td> </tr> <tr> <td>Amount previously authorized this fiscal year:</td> <td>\$0</td> </tr> <tr> <td>Total amount authorized after this legislative action:</td> <td>\$54,548.72</td> </tr> <tr> <td>Amount budgeted for this item * (including transfers):</td> <td>\$54,548.72</td> </tr> <tr> <td>Source of funding (name of fund) and account code number: 001-1305-6790 General Fund, Information Technology, Other Professional Services</td> <td>\$54,548.72</td> </tr> </table> <p>OTHER FINANCIAL INFORMATION:</p> <p><input type="checkbox"/> No budget impact (no fiscal note required) <input type="checkbox"/> Term and Supply Contract (funds approved in the annual budget); estimated value and use of contract: Department: _____ Estimated Use: _____</p> <p>Prior Year Budget (if applicable): _____ Prior Year Actual Amount Spent (if applicable): _____</p>	Amount authorized by this legislation this fiscal year:	\$54,548.72	Amount previously authorized this fiscal year:	\$0	Total amount authorized after this legislative action:	\$54,548.72	Amount budgeted for this item * (including transfers):	\$54,548.72	Source of funding (name of fund) and account code number: 001-1305-6790 General Fund, Information Technology, Other Professional Services	\$54,548.72
Amount authorized by this legislation this fiscal year:	\$54,548.72										
Amount previously authorized this fiscal year:	\$0										
Total amount authorized after this legislative action:	\$54,548.72										
Amount budgeted for this item * (including transfers):	\$54,548.72										
Source of funding (name of fund) and account code number: 001-1305-6790 General Fund, Information Technology, Other Professional Services	\$54,548.72										
<p>PRIOR LEGISLATION</p>	<p>Prior ordinances and (date): _____ Prior resolutions and (date): _____</p>										
<p>CONTACT INFORMATION</p>	<p>RLA drafted by (name, title, & phone): Craig Reich, Senior Buyer, 881-3265</p>										
<p>REQUEST SUMMARY</p>	<p>There are large investments of time and money in GIS as part of Jackson County's Enterprise System. A plan for existing and future GIS growth and operation is imperative. The changes in technology are moving at a very rapid pace. The need for specialized services to help direct and guide GIS to meet the current and future needs of the County is a top priority. System architecture, special data models as well as enterprise solution are in need of updating to meet the future demands of the enterprise GIS. Each Department has vastly different GIS needs. Identifying those needs could take many hours for GIS staff to learn departmental standards. We would like PRO-WEST to do a complete County-wide needs assessment and implementation plan to support current and future enterprise GIS operations.</p> <table border="1"> <thead> <tr> <th>Vendor Name and Location</th> <th>Amount</th> </tr> </thead> <tbody> <tr> <td>PRO-WEST</td> <td>\$54,548.72</td> </tr> <tr> <td>Total</td> <td>\$54,548.72</td> </tr> </tbody> </table> <p>Pursuant to Section 1030.2, Acquisition From Other Government, of the Jackson County Code,. The Director of Finance and Purchasing recommends the Adoption of The Strategic Plan for GIS by PRO-WEST for the use by IT/GIS Department at a total cost to the County of \$54,548.72.</p>	Vendor Name and Location	Amount	PRO-WEST	\$54,548.72	Total	\$54,548.72				
Vendor Name and Location	Amount										
PRO-WEST	\$54,548.72										
Total	\$54,548.72										
<p>CLEARANCE</p>	<p><input type="checkbox"/> Tax Clearance Completed (Purchasing & Department) N/A <input checked="" type="checkbox"/> Business License Verified (Purchasing & Department) <input type="checkbox"/> Chapter 6 Compliance - Affirmative Action/Prevailing Wage (County Auditor's Office) N/A</p>										
<p>COMPLIANCE</p>	<p><input type="checkbox"/> MBE Goals N/A <input type="checkbox"/> WBE Goals N/A</p>										

	<input type="checkbox"/> VBE Goals N/A	
ATTACHMENTS	Information Technology Memorandum and vendor's invoices	
REVIEW	Department Director: <i>MA</i>	Date: <i>7/23/2019</i>
	Finance (Budget Approval): <i>If applicable</i>	Date: <i>7/24/19</i>
	Division Manager: <i>[Signature]</i>	Date: <i>7/25/19</i>
	County Counselor's Office: <i>Bay County</i>	Date: <i>8/1/19</i>

Fiscal Information (to be verified by Budget Office in Finance Department)

- This expenditure was included in the annual budget.
- Funds for this were encumbered from the _____ Fund in ____.
- There is a balance otherwise unencumbered to the credit of the appropriation to which the expenditure is chargeable and there is a cash balance otherwise unencumbered in the treasury to the credit of the fund from which payment is to be made each sufficient to provide for the obligation herein authorized.
- Funds sufficient for this expenditure will be/were appropriated by Ordinance # _____
- Funds sufficient for this appropriation are available from the source indicated below.

Account Number:	Account Title:	Amount Not to Exceed:

- This award is made on a need basis and does not obligate Jackson County to pay any specific amount. The availability of funds for specific purchases will, of necessity, be determined as each using agency places its order.
- This legislative action does not impact the County financially and does not require Finance/Budget approval.

Fiscal Note:

This expenditure was included in the Annual Budget.

PC# _____

Date: July 24, 2019

RES # 20214

Department / Division Character/Description Not to Exceed

001 General Fund

1305 Information Technology 56790 Other Contractual Services \$ 54,549

\$ 54,549

 7/24/19

Budget Officer



**Department of
INFORMATION TECHNOLOGY**
JACKSON COUNTY, MISSOURI

816-881-3151

415 EAST 12TH STREET, ROOM G-8
KANSAS CITY, MO 64106

TO: CRAIG REICH, SENIOR BUYER

FROM: MICHAEL ERICKSON, DIRECTOR OF IT AND GIS *ME*

DATE: OCTOBER 26, 2018

RE: REQUEST FOR AN RFA TO HAVE PRO-WEST CREATE A JACKSON COUNTY GIS STRATEGIC PLAN

THERE ARE LARGE INVESTMENTS OF TIME AND MONEY IN GIS AS PART OF JACKSON COUNTY'S ENTERPRISE SYSTEM. A PLAN FOR EXISTING AND FUTURE GIS GROWTH AND OPERATIONS IS IMPERATIVE. THE CHANGES IN TECHNOLOGY ARE MOVING AT A VERY RAPID PACE. THE NEED FOR SPECIALIZED SERVICES TO HELP DIRECT AND GUIDE GIS TO MEET THE CURRENT AND FUTURE NEEDS OF THE COUNTY IS A TOP PRIORITY. SYSTEM ARCHITECTURE, SPACIAL DATA MODELS AS WELL AS ENTERPRISE SOLUTIONS ARE IN NEED OF UPDATING TO MEET THE FUTURE DEMANDS OF THE ENTERPRISE GIS. EACH DEPARTMENT HAS VASTLY DIFFERENT GIS NEEDS. IDENTIFYING THOSE NEEDS COULD TAKE MANY HOURS FOR GIS STAFF TO LEARN DEPARTMENTAL STANDARDS. WE WOULD LIKE PRO-WEST TO DO A COMPLETE COUNTY-WIDE NEEDS ASSESSMENT AND IMPLEMENTATION PLAN TO SUPPORT CURRENT AND FUTURE ENTERPRISE GIS OPERATIONS.

COST OF THE PRO-WEST ASSESSMENT:

001-1305-6790 \$54,548.72

PROJECT ESTIMATE



Jackson County, Missouri

GIS Services

Date: 3-18-19

Client: Jackson County IT Department

PROJECT DESCRIPTION

Complete a countywide Needs Assessment and Implementation Plan to support current and future Enterprise GIS implementation.

PROJECT MANAGEMENT

Pro-West & Associates Project Manager: Kendis Scharenbroich
Phone: 320-207-6861
Email: kscharen@prowestgis.com

Client Project Manager: TBD
Phone:
Email:

Project Schedule: TBD

CLIENT RESPONSIBILITIES

1. Coordinate staff schedule and conference room logistics for onsite visit
2. Participate in conference calls
3. Review plan documentation within three weeks of receiving the draft

**If assistance is needed with client responsibilities, additional costs may apply*

DELIVERABLES

Kick-Off Call and Pre Onsite Planning

1. **Kick-off conference call** – Pro-West would host a call with the County after the contract is signed, to be attended by Pro-West technical staff and County stakeholders
2. **Identify and clarify stakeholders** – Pro-West and the County will verify the project team, staff roles, and contact information during this call.
3. **Define communication plan for the project** – emails, phone calls, and project documentation
4. **Plan for on-site needs assessment**
 - a. *Departments and staff participation*
 - i. Identify departments to be included in on-site meetings
 - a. PWA assumes up to 16 departments may be participating over a week long time period
 - ii. Identify staff within those departments that will attend the on-site meetings
 - a. Departments with high GIS use such as Assessing, Economic Development, Park & Rec, and Public Works would require 2hrs for an on-site session
 - b. Departments with a traditionally lower use of GIS such as the Health Department would require a 1 hour session
 - iii. If there are departments that cannot make a session during the three days onsite, Pro-West will accommodate a follow-up online meeting with those departments within 2 weeks of being on-site
 - iv. Pro-West will provide information for County stakeholders to review and send to departments to prepare for Pro-West’s on-site visit
 - a. If possible, prior to the on-site visit, Pro-West would like a list of the GIS data currently being managed by each department. If GIS/IT staff have this list or a start to this list, Pro-West can use it.
 - b. *Timeline*
 - i. Pro-West would provide available on-site dates to the County
 - ii. The County stakeholders would coordinate with the departments involved to schedule sessions on the dates suggested by Pro-West
 - iii. Pro-West requests a single conference room to hold interviews. This maximizes the amount of time spent with staff
 - c. *Results* – Pro-West will identify topics to be covered during the on-site visit. Below is a sample list. The County and Pro-West would sign off on the topics prior to the on-site visit.
 - i. System architecture and design
 - a. Software including licensing recommendations
 - b. Hardware
 - c. This will be covered in a discussion with GIS/IT staff
 - ii. External/third party system usage: system integration
 - iii. Map use within the departments
 - iv. Data needs – needs, updates, accuracy, system integration needs

- v. Application/solution needs
 - a. Internal – departmental
 - b. Internal – interdepartmental
 - c. Mobile
 - d. HUB
 - e. Public facing

5. Preparation work for Pro-West and County stakeholders – Pro-West will ask County stakeholders/Project Manager to coordinate logistics with departments to:

- a. Clarify which department can meet on which day during which timeframe
- b. Identify any departments that may need Pro-West “at” their office, such as Water Works
- c. Determine logistics (conference rooms, wifi, etc.)

On-site GIS Needs Assessment

Pro-West will be on-site for five days during the needs assessment project phase. Pro-West assumes that department sessions will occur between 8:00am and 4:30pm. Pro-West will host a 1-hour kick off session prior to interviews starting and a 1-hour closing session on the fifth day for County stakeholders to recap the visit and next steps. One or more County stakeholders are welcome to attend one or more department sessions. Pro-West will provide supporting demonstrations during sessions to facilitate conversation.

While onsite, Pro-West will include conversations regarding Cartegraph and GIS integration, as well as overall utility GIS data needs and management. Esri’s HUB will also be discussed to identify current and future needs.

Needs Assessment/Implementation Document

Pro-West will deliver a document that outlines feedback gathered from the departments. The document will include:

- 1. Recommendations and Gap Analysis for:**
 - a. System architecture design
 1. Hardware, software and licensing recommendations
 2. A proposed system diagram will be included
 3. Security considerations
 - b. Spatial data models and standards
 1. Enterprise Geodatabase modeling recommendations
 2. Maintenance workflows (versioning, etc)
 3. Accuracy considerations
 4. System of record considerations
 5. Development and/or data enhancement recommendations
 - c. Recommendations for executing and/or planning for future system integrations
 1. Cartegraph
 2. Other, as determined during Needs Assessment
 - d. Enterprise geodatabase best practices
 - e. ArcGIS HUB recommendations
 1. Review of Initiatives
 2. Implementation recommendations

- f. Training and skill requirements
 - i. IT training
 - ii. GIS staff training
 - iii. End user training
- 2. **Cost estimates for all recommendations** – cost ranges will be supplied to implement proposed on-premise system architecture design including hardware/software costs and licensing considerations, as well as all other recommendations as appropriate. Additional scopes of work will be necessary to implement recommendations, per County needs.
- 3. **Resource considerations**
 - a. Budget resources and planning
 - b. Staff resources and growth planning
- 4. **Application/solution recommendations**
 - a. Pro-West will outline high priority solution needs for the organization and for each department
 - b. ArcGIS Online recommendations
 - c. Mobile solution recommendations
 - d. COTS vs. custom solutions
- 5. **Return on Investment** – Pro-West will outline ROI for the County and/or departments based on the results of the on-site visit
- 6. **Risk Assessment** – identify risks and mitigation for implementation recommendations

Document Review & Edits

- 1. Pro-West will send the document to County stakeholders and will set up a call to review the document and address the County's questions
- 2. Pro-West will discuss appropriate implementation phases
- 3. After the call to review, Pro-West will make any required edits to the document and will provide the County with a final document

County Board Presentation

Pro-West will be on-site to present the final, approved Needs Assessment and Implementation Plan to the County Board.

Sample Needs Assessment and Implementation Table of Contents

Contents	
Introduction	4
Current GIS Impact	7
People	7
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Hardware	8
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COST ESTIMATE

\$54,548.72

Contract Vehicle

The County will be using the Pro-West's GSA contract and escalated rates to facilitate task orders. Project will be completed using Year 2 rates.

GSA contract number 47QTCA18D00AS

If the scope, objectives, or timeline change significantly before the project is completed, we will agree to discuss any necessary modifications to our agreed-upon fee or to the scope, objectives, or timeline of the project.

** Payment is due within 45 days of an invoice date. If payments are not received within 45 days of the invoice date, a late fee of 1.5% of the invoice amount will be charged for each 45 day cycle that the payment is late.*

*** 3% convenience fee will be added for payment by credit card*

To proceed with the described services in this estimate, please sign and date below and return to the Project Manager listed above.

CLIENT

Acceptance Signature:

_____ Date: _____

Pro-West & Associates

Signature:

_____ Date: _____

Estimate valid for 90 days

IN THE COUNTY LEGISLATURE OF JACKSON COUNTY, MISSOURI

A RESOLUTION transferring \$57,000.00 within the 2019 Health Fund, to cover budget shortfalls for contractual services, laboratory supplies, and other operating supplies within the Medical Examiner's Office.

RESOLUTION NO. 20215, August 5, 2019

INTRODUCED BY Charlie Franklin, County Legislator

WHEREAS, the Medical Examiner's Office has experienced budget shortfalls in its accounts for contractual services, laboratory supplies, and other operating supplies; and,

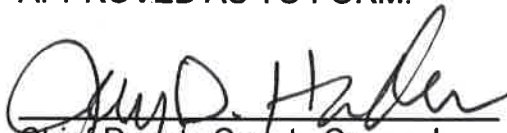
WHEREAS, a transfer is necessary to cover these costs; now therefore,


BE IT RESOLVED by the County Legislature of Jackson County, Missouri, that the following transfer within the 2019 Health Fund be and hereby is made:

<u>DEPARTMENT/DIVISION</u>	<u>CHARACTER DESCRIPTION</u>	<u>FROM</u>	<u>TO</u>
Health Fund			
Medical Examiner			
002-2001	56847-Lab Fees	\$57,000	
002-2001	56790-Other Contractual Services		\$35,000
002-2001	57180- Laboratory Supplies		\$12,000
002-2001	57230-Other Operating Supplies		\$10,000

Effective Date: This Resolution shall be effective immediately upon its passage by a majority of the Legislature.

APPROVED AS TO FORM:


Chief Deputy County Counselor


County Counselor

Certificate of Passage

I hereby certify that the attached resolution, Resolution No. 20215 of August 5, 2019, as duly passed on _____, 2019 by the Jackson County Legislature. The votes thereon were as follows:

Yeas _____

Nays _____

Abstaining _____

Absent _____

Date

Mary Jo Spino, Clerk of Legislature

Funds sufficient for this transfer are available from the sources indicated below.

ACCOUNT NUMBER: 002 2001 56847
ACCOUNT TITLE: Health Fund
Medical Examiner
Lab Fees
NOT TO EXCEED: \$57,000.00

7/31/19

Date



Chief Administrative Officer

JUL 24 2019

<p>SUBJECT</p>	<p>Action Requested <input checked="" type="checkbox"/> Resolution <input type="checkbox"/> Ordinance</p> <p>Project/Title: Requesting a resolution to transfer funds within the Medical Examiner's 2019 budget to cover deficits.</p>																						
<p>BUDGET INFORMATION <i>To be completed By Requesting Department and Finance</i></p>	<table border="1"> <tr> <td>Amount authorized by this legislation this fiscal year:</td> <td>\$57,000</td> </tr> <tr> <td>Amount previously authorized this fiscal year:</td> <td>\$0</td> </tr> <tr> <td>Total amount authorized after this legislative action:</td> <td>\$57,000</td> </tr> <tr> <td>Amount budgeted for this item * (including transfers):</td> <td>\$57,000</td> </tr> <tr> <td>Source of funding (name of fund) and account code number:</td> <td></td> </tr> <tr> <td>From:</td> <td></td> </tr> <tr> <td>002-2001-6847 Health Fund, MEO, Laboratory Fees</td> <td>\$57,000</td> </tr> <tr> <td>To:</td> <td></td> </tr> <tr> <td>002-2001-6790 Health Fund, MEO, Other Contractual Services</td> <td>\$35,000</td> </tr> <tr> <td>002-2001-7180 Health Fund, MEO, Laboratory Supplies</td> <td>\$12,000</td> </tr> <tr> <td>002-2001-7230 Health Fund, MEO, Other Operating Supplies</td> <td>\$10,000</td> </tr> </table> <p>* If account includes additional funds for other expenses, total budgeted in the account is: \$</p> <p>OTHER FINANCIAL INFORMATION:</p> <p><input type="checkbox"/> No budget impact (no fiscal note required) <input type="checkbox"/> Term and Supply Contract (funds approved in the annual budget); estimated value and use of contract: Department: Estimated Use:</p> <p>Prior Year Budget (if applicable): Prior Year Actual Amount Spent (if applicable):</p>	Amount authorized by this legislation this fiscal year:	\$57,000	Amount previously authorized this fiscal year:	\$0	Total amount authorized after this legislative action:	\$57,000	Amount budgeted for this item * (including transfers):	\$57,000	Source of funding (name of fund) and account code number:		From:		002-2001-6847 Health Fund, MEO, Laboratory Fees	\$57,000	To:		002-2001-6790 Health Fund, MEO, Other Contractual Services	\$35,000	002-2001-7180 Health Fund, MEO, Laboratory Supplies	\$12,000	002-2001-7230 Health Fund, MEO, Other Operating Supplies	\$10,000
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<p>PRIOR LEGISLATION</p>	<p>Prior ordinances and (date): Prior resolutions and (date):</p>																						
<p>CONTACT INFORMATION</p>	<p>RLA drafted by (name, title, & phone): RLA drafted by Kandi Brooke, Administrative Supervisor for Dr. Marius Tarau, Chief Medical Examiner, (816) 881-6609</p>																						
<p>REQUEST SUMMARY</p>	<p>Requesting a resolution to transfer \$57,000 within the Medical Examiner's 2019 budget to cover shortfalls.</p>																						
<p>CLEARANCE</p>	<p><input type="checkbox"/> Tax Clearance Completed (Purchasing & Department) <input type="checkbox"/> Business License Verified (Purchasing & Department) <input type="checkbox"/> Chapter 6 Compliance - Affirmative Action/Prevailing Wage (County Auditor's Office)</p>																						
<p>COMPLIANCE</p>	<p><input type="checkbox"/> MBE Goals <input type="checkbox"/> WBE Goals <input type="checkbox"/> VBE Goals</p>																						
<p>ATTACHMENTS</p>																							

REVIEW	Department Director: <i>Clayton Saravanan</i>	Date: <i>07/22/2019</i>
	Finance (Budget Approval): <i>If applicable</i>	Date: <i>7/24/19</i>
	Division Manager: <i>George Mat</i>	Date: <i>7-27-19</i>
	County Counselor's Office: <i>Bryan Cummings</i>	Date: <i>7/31/19</i>

Fiscal Information (to be verified by Budget Office in Finance Department)

- This expenditure was included in the annual budget.
- Funds for this were encumbered from the _____ Fund in ____.
- There is a balance otherwise unencumbered to the credit of the appropriation to which the expenditure is chargeable and there is a cash balance otherwise unencumbered in the treasury to the credit of the fund from which payment is to be made each sufficient to provide for the obligation herein authorized.
- Funds sufficient for this expenditure will be/were appropriated by Ordinance #
- Funds sufficient for this appropriation are available from the source indicated below.

Account Number:	Account Title:	Amount Not to Exceed:

- This award is made on a need basis and does not obligate Jackson County to pay any specific amount. The availability of funds for specific purchases will, of necessity, be determined as each using agency places its order.
- This legislative action does not impact the County financially and does not require Finance/Budget approval.



Medical Examiner's Office

950 East 21st Street
Kansas City, MO 64108
816-881-6600
816-881-6641 fax

MEMO

To: Jaime Masters, Chief of Health Services

From: Dr. Marius Tarau, M.D.

Date: July 22, 2019

Re: Justification regarding RLA

The Jackson County Medical Examiner's Office (JCMEO) is requesting submission of the attached RLA in the amount of \$57,000 to cover deficits in the 2019 adopted budget.

As you know, the JCMEO 2019 budget was reduced by over \$300,000 before being presented for approval in January. That reduction was based on expectations that our caseload would decrease substantially after the loss of the three previously contracted counties. Unfortunately, the Jackson County homicide and opioid death rates remain at an all-time high. With a higher case load, expenditures on each case have increased across the board within our own jurisdiction.

Due to the savings created by the new lab services contract that began in September 2018, we can request this transfer within our own budget, creating no additional expense to Jackson County.

I greatly appreciate your assistance in this matter. Please let me know if you have any questions or request any documentation on this issue.

Regards,

Marius Tarau, M.D.
Chief Medical Examiner



RECEIVED

AUG 01 2019

MARY JO SPINO
COUNTY CLERK

FRANK WHITE, JR.
Jackson County Executive

212
8-1-19
10:30 am

EXECUTIVE ORDER NO. 19-20

**TO: MEMBERS OF THE LEGISLATURE
CLERK OF THE LEGISLATURE**

**FROM: FRANK WHITE, JR.
COUNTY EXECUTIVE**

DATE: July 31, 2019

RE: APPOINTMENT INTERIM CHIEF OPERATING OFFICER

I hereby appoint Jaime Masters as Interim Chief Operating Officer to serve until the appointment of a permanent Chief Operating Officer, effective August 1, 2019. Ms. Masters shall continue to serve as Chief of Health Services.



Frank White, Jr., County Executive

Dated: 8/1/19