

IN THE COUNTY LEGISLATURE OF JACKSON COUNTY, MISSOURI

A RESOLUTION declaring certain property within various County departments as surplus and unusable personal property and authorizing its disposal.

RESOLUTION NO. 20018, October 22, 2018

INTRODUCED BY Dennis Waits, County Legislator

WHEREAS, various County departments and the Sixteenth Judicial Circuit Court are in possession of miscellaneous equipment, computers, and other personal property that are no longer functional and/or can no longer be used, further described and itemized in the attached declaration forms; and,

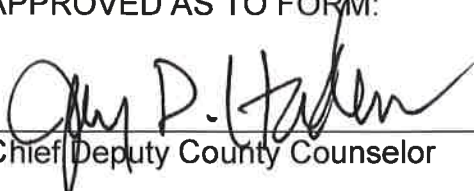
WHEREAS, the Director of Finance and Purchasing recommends that said property be declared surplus and unusable; and,

WHEREAS, all items listed on the attached declaration forms will be sold at auction; 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 to dispose 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. 20018 of October 22, 2018, was duly passed on October 29, 2018 by the Jackson County Legislature. The votes thereon were as follows:

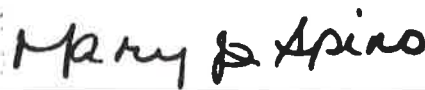
Yeas 9

Nays 0

Abstaining 0

Absent 0

10-29-2018
Date



Mary Jo Spino, Clerk of Legislature



SURPLUS/TRANSFER DECLARATION FORM

JACKSON COUNTY, MISSOURI

-DO NOT DUPLICATE-

SURPLUS

TRANSFER

Department Name: Corrections Department Code: 2701		Date Transfer Received:	
Phone Number: 816-813-9362		Department Transferring Asset:	
<input checked="" type="checkbox"/> Transfer		Department Receiving Asset:	
Disposition Code*		Serial/Vin Number	
Asset Description	Model Year	Make/Model	Purchase Date
SCISSOR (3)			
LOCKERS (6)			
LOCKERS (18)		LYON	
LOCKERS (80)		PENCO	
BAKING PANK CARTS (16)			
TRAY RACK (3)			
STOVE		GARLAND	
RICER		DITTO DEAN	
FOOD TRAYS (187)			
STEAM KETTLE			
STACKING CHAIRS (8)			
TOLD WELL SERVINGS (one 12)			
GRIDDLE			
TONER CARTRIDGES USED (12500)			
BUSINESS CARD LASER FAX			
MAPPING FILE FRAMES (1)			
			Original Cost
			\$12,000

* Indicate (S) Sold (D) Donated, (R) Replaced, (X) Scrapped, (T) Trade-in, or (O) Other
 ** Refer to Asset Stencil 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

Department Name: <i>Collection</i>		Department Code: <i>2701</i>	Date Transfer Received:							
Phone Number: <i>816-813-9362</i>		Department Transferring Asset:								
<input checked="" type="checkbox"/> Select only one <input type="checkbox"/> Transfer		Department Receiving Asset:								
<input type="checkbox"/> Subtitle <input type="checkbox"/> Transfer		Receiving Department Contact:								
<input type="checkbox"/> Transfer <input type="checkbox"/> Transfer		Receiving Department Phone Number:								
Transaction Date	Fiscal Year	Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
			<i>Handing Files (BX)</i>							
			<i>FAX MACHINE (2)</i>			<i>INTERIFA</i>	<i>4100E</i>			
			<i>FAX MACHINE (1)</i>			<i>INTERIFA</i>	<i>4750E</i>			
			<i>FILE JACKETS (BX)</i>							
			<i>LAZEX GLOVES (BX)</i>							
			<i>BEAN AND SHOWER SOAK (2)</i>			<i>CARPEX</i>				
			<i>STEAM IRONER (1)</i>			<i>BISSELL</i>	<i>LEAF GREEN</i>			
			<i>2-WHEEL TRIMMER (1)</i>			<i>BOLENS</i>	<i>BL100</i>			
			<i>MATTRESS</i>			<i>PERBY</i>				
			<i>TISSUE DISPENSER (4)</i>			<i>VERSATY</i>				
			<i>TISSUE DISPENSER (4)</i>			<i>G.P.</i>	<i>59206</i>			
<i>06778</i>			<i>DECATALON 1500</i>							
<i>06885</i>			<i>DECATALON 1500</i>							
			<i>WET/DRY VAC</i>			<i>REMOUN</i>	<i>REN 080 R UP 04183</i>			
			<i>WET/DRY VAC</i>			<i>REMOUN</i>	<i>REN 080 R UP 03877</i>			
			<i>WET/DRY VAC</i>			<i>REMOUN</i>	<i>REN 080 R UP 03234</i>			

* 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		Date Transfer Received						
Point of Contact: <u>Don O'Reilly</u>		Department Receiving Asset:						
Department Code: <u>2701</u>		Responsible Department Contact:						
Phone Number:		Receiving Department Phone Number:						
<input checked="" type="checkbox"/> Surplus <input type="checkbox"/> Transfer								
Transaction Date	Fixed Asset #	Asset Description	Disposition Code	Model Year	Make/Model	Serial/Vin Number	Purchase Date	Original Cost
7/24/18	NO#	2 tan 4 drawer file cabinets						
	NO#	1 DK chair						
	NO#	1 4 drawer Black cabinet						
	NO#	1 2 drawer tan cabinet						
	NO#	1 18 door locker						
	NO#	2 black 2 dr black cabinet						

1. User Department send to Finance Department



SURPLUS/TRANSFER DECLARATION FORM

JACKSON COUNTY, MISSOURI

SURPLUS

TRANSFER

-DO NOT DUPLICATE-

Bureau Name: <u>COOPERATIVE</u> Department Code: <u>2701</u> Date Transfer Received: _____ Phone Number: <u>816-813-9363</u> Department Transferring Asset: _____ Receiving Department Contact: _____ Receiving Department Phone Number: _____								
<input checked="" type="checkbox"/> Surplus <input type="checkbox"/> Transfer								
Asset #	Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Unit Number	Acquire Date**	Original Value
		TRAY RACKS (2)	Brown					
		WIRE RACKS (2)						
		DRYING RACK (1)						
		WIRE SHELVING (5)						
		METAL FILE SHELF (2)						
		DESK (2)						
		ALUMINUM CHAIRS (3)	BLUE					
		SHEET PANS (92)						
		FRYER BASKETS (9)						
		STACK POTS (3)						
		STEEL POT LIDS (3)						
		SEWING PANS (6)						
		GLAND WHIP (1)						
		TABLE (1)						

* Indicate if Asset was (S) Sold, (D) Donated, (R) Reacquired, (C) 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: CORRECTIONS		Department Code: 2701		Date Transfer Received:	
Name: CRAIG FISHER		Phone Number: 816-891-9632		Department Transferring Asset:	
<input checked="" type="checkbox"/> Fixed Asset #		<input type="checkbox"/> Transfer		Department Receiving Asset:	
Disposition Code*		Asset Description		Receiving Department Contact: Receiving Department Phone Number:	
Model Year	Disposition Code*	Asset Description	Make/Model	Serial/In Number	Useful Life**
		FLAT SCREEN TV MONITOR (4)			
		SPACE HEATER			
		MICROWAVES (32)			
		3-RING BUNDLES (61)			
		DESK FANS (2)			
		FAX (1)		BAUNTER 14300	DE 3516851
		OFFICE CHAIR (2)			
		2.5 x 3.5 ENVELOPES (7500)			
		ALUMINUM LEATHER (BOX)			
		HOT MELT SEWER LINE (1)			
		RUNNING CABINET (1)			
		SLICER (1)			
		SLICER (1)			
		COOLER (1)			
		NETAL STORAGE CABINET (1)			
		CATHOD CRINDASTON (1)			

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SURPLUS/TRANSFER DECLARATION FORM

JACKSON COUNTY, MISSOURI

-DO NOT DUPLICATE-

SURPLUS

TRANSFER

Department Code: 8701 Phone Number: 916-813-9362		Date Transfer Received:							
Name: CRAG MOTHER		Department Transferring Asset:							
Department Code: 8701 C		Department Receiving Asset:							
Phone Number: 916-813-9362		Receiving Department Contact:							
Select only one: <input checked="" type="checkbox"/> Surplus <input type="checkbox"/> Transfer		Receiving Department Phone Number:							
Transaction Date	Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial Vin Number	Useful Life**	Purchase Date	Original Cost
		CASE TRAYS (4)							
		NOBILIN HOLEPONS (3)							

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SURPLUS/TRANSFER DECLARATION FORM
JACKSON COUNTY, MISSOURI
SURPLUS

-DO NOT DUPLICATE-

TRANSFER

Date of Surplus:		Department Code:		Date Transfer Received:					
Department Name:		Phone Number:		Department Transferring Asset:					
Point of Contact:		Transfer <input type="checkbox"/>		Department Receiving Asset:					
Please Check: Select only one		Disposition Code*		Receiving Department Contact:					
<input type="checkbox"/> Surplus		Asset Description		Receiving Department Phone Number:					
Transaction Date	Fixed Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Win Number	Useful Life**	Purchase Date	Original Cost
		HEPA VACUUM			PRO FORCE				
		HEPA VACUUM			PRO FORCE				
		WATER COOLER							
		CLEANING CHEMICALS			(BOX)				
		TRASH CAN							
		PICKABLE BED FRAME							
		BATTERY (UPGRADER)			(2)				
		1/4-SIZE LEARNATOR GARAGE DISPOSAL							
		BROOM HANDLES							
		OFFICE FAN			(2)				
		BROKEN CHAIR							
		UPS w/AVR			FELOWES				

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JACKSON COUNTY, MISSOURI

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SURPLUS

TRANSFER

Date of Surplus:		Department Code:		Date Transfer Received:		Department Transferring Asset:		Original Cost	
Point of Contact:		Phone Number:		Make/Model		Serial/Win Number		Purchase Date	
Please Check: Select only one		Asset Description		Disposition Code*		Model Year		Useful Life**	
<input type="checkbox"/> Surplus	<input type="checkbox"/> Transfer								
Transaction Date	Fixed Asset #								
		CANDY VENDING MACHINES (3)							
		VERTICAL FILE CABINET							
		METAL BOOR SHELF							
		RESTROOM PARTITION							
		4 DRAWER FILE CABINET							
		CURICAL WALL PARTS							
		STAINLESS STEEL ROLLING TABLE							
		OFFICE CHAIRS (7)							
		WHEEL CHAIR							
		COMPACT REFRIGERATOR				DAMBY			
		FOOD TRAYS (BOX)							
		RALLETS (50 EST)							
		CANDY ANCHORS (4)							
		ROLLING CART							

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SURPLUS

TRANSFER

Date of Surplus:		Date Transfer Received:							
Department Name:		Department Transferring Asset:							
Point of Contact:		Department Receiving Asset:							
Please Check: <input 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
		1/2 WATER DISPENSER							
		UTILITY SINK BASIN (3)							
		PLASTIC INGS (2)							
		AIR MATTRESS							
		HAIR CLIPPERS (BOX)							
		FLOOR DRYER							
		FLOOR DRYER							
		PEDESTAL FAN							
		5 GEAR WATER CONTROLLER (2)							
		LED LAMPS							
		BLACK STRIPPING PAPER (BOX)							
		MOWER							
		2 DOOR FILE CABINET							
		CANVAS SHOES (4BOXES)							

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