

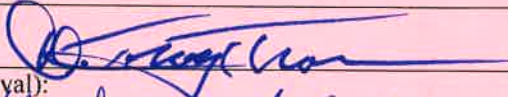
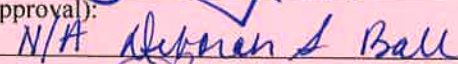
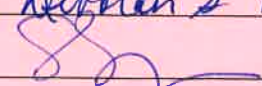
# REQUEST FOR LEGISLATIVE ACTION

Completed by County Counselor's Office:

Res/Ord No.: 18568

Sponsor(s): Theresa Garza Ruiz

Date: July 21, 2014

SUBJECT	Action Requested <input checked="" type="checkbox"/> Resolution <input type="checkbox"/> Ordinance  Project/Title: <u>Declaring certain personal property as Surplus and authorizing its disposal pursuant to Chapter 11 of the Jackson County Code.</u>																
BUDGET INFORMATION <i>To be completed By Requesting Department and Finance</i>	<table border="1" data-bbox="337 506 1222 730"> <tr> <td>Amount authorized by this legislation this fiscal year:</td> <td></td> <td>\$</td> </tr> <tr> <td>Amount previously authorized this fiscal year:</td> <td></td> <td>\$</td> </tr> <tr> <td>Total amount authorized after this legislative action:</td> <td></td> <td>\$</td> </tr> <tr> <td>Amount budgeted for this item * (including transfers):</td> <td></td> <td>\$</td> </tr> <tr> <td>Source of funding (name of fund) and account code number</td> <td></td> <td></td> </tr> </table> <p>* If account includes additional funds for other expenses, total budgeted in the account is: \$</p> OTHER FINANCIAL INFORMATION: <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: \$ _____  Prior Year Budget (if applicable): _____ Prior Year Actual Amount Spent (if applicable): _____		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	Prior ordinances and (date): _____ Prior resolutions and (date): _____																
CONTACT INFORMATION	RLA drafted by (name, title, & phone): Anessa Culbertson, Senior Buyer, 881-3465																
REQUEST SUMMARY	The Drug Task Force and IT have requested Purchasing assist in disposing of unusable personal property.  The Director of Finance and Purchasing recommends the unusable personal property on the attached Exhibits be declared surplus and unusable personal property and disposal in accordance with Chapter 11 of the Jackson County Code, 1984, be authorized.  Disposal Plans: The disposal plan for the computer items at IT; and the pickup of four vehicles for the Drug Task Force, all scheduled for disposal with Affiliated Auctioneers, our contracted auction company for surplus disposal.  All proceeds must be credited to the General Fund per Chapter 5, Section 535.2 of the County Code.																
CLEARANCE	<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)																
ATTACHMENTS	Surplus Declaration Forms																
REVIEW	Department Director:  Finance (Budget Approval): <i>N/A</i>  Division Manager:  County Counselor's Office: _____	Date: 7/8/14 Date: 7-9-14 Date: 7/15/14 Date: _____															

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.



**SURPLUS/TRANSFER DECLARATION FORM**  
**JACKSON COUNTY, MISSOURI**

-DO NOT DUPLICATE-

**SURPLUS**

**TRANSFER**

Date of Surplus: \_\_\_\_\_ Date Transfer Received: \_\_\_\_\_

Department Name: Dog Toss Force Department Code: 008-4151  
 Point of Contact: Sarah Mathis Phone Number: 816-502-4713

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
		Vehicle		2007	Chevy Malibu	16PDT135972203047		1/4/07	
		Vehicle		2008	Chevy Equinox	16N2T3M482245308		2/20/08	
		Vehicle		2004	Chevy Silverado	25KEK19T141129121		10/30/08	
		Vehicle		2006	Ford Explorer	1FMEU72E6604803724		2/27/06	

\* 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**

Date of Surplus:		Date Transfer Received:							
Department Name: <i>Dona Task Force</i>	Department Code: <i>008-1151</i>	Department Transferring Asset:							
Point of Contact: <i>Squad Manager</i>	Phone Number: <i>8165034712</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	Fixed Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
		<i>Vehicle</i>		<i>2006</i>	<i>Ford/Escape</i>	<i>1FMYU93116KA22520</i>		<i>6/7/05</i>	

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

-DO NOT DUPLICATE-

**JACKSON COUNTY, MISSOURI**  
**SURPLUS**  
**SURPLUS/TRANSFER DECLARATION FORM**

**TRANSFER**

Date of Surplus: \_\_\_\_\_ Date Transfer Received: \_\_\_\_\_  
 Department Name: Dunn Gas Store Department Code: 028-4151 Department Transferring Asset: \_\_\_\_\_  
 Point of Contact: Sarah Matthews Phone Number: 816 502-4712 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
		<u>Vehicle</u>		<u>1991</u>	<u>Ford</u>	<u>1FTFE24H2M#</u> <u>A31927</u>		<u>12/21/90</u>	

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



**SURPLUS/TRANSFER DECLARATION FORM**  
**JACKSON COUNTY, MISSOURI**  
**SURPLUS**

- DO NOT DUPLICATE -  
Exhibit 4 of 9

**TRANSFER**

Date of Surplus: 6/24/14

Department Name: Recorder of Deeds    Department Code: 1801    Date Transfer Received: \_\_\_\_\_

Point of Contact: Sandae    Phone Number: 881-3191    Department Transferring 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
		Brother fax machine	X		FAX-2820	U61325JN189448			
	4124	Dell Computer	X		Dell DHS	6M97871			
	4704	Dell Computer	X			1038953			
	11618	Dell Computer	X			J7N3561			
		Canon Scanner	X		DR-9080C	CZ303311			
	8330	HP Printer	X		2200D	14387			

\* 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-  
Exhibit 5 of 9

### TRANSFER

Date of Surplus: 6/24/14	Date Transfer Received:		
Department Name: Recorder of Deeds	Department Code: 1801	Department Transferring Asset:	
Point of Contact: Sandae	Phone Number: 881-3191	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
	4689	Dell Computer			Optiplex GX620				
	4690	Dell Computer			Optiplex GX620				
	4692	Dell Computer			Optiplex GX620				
	4693	Dell Computer			Optiplex GX620				
	4694	Dell Computer			Optiplex GX620				
	4695	Dell Computer			Optiplex GX620				
	4696	Dell Computer			Optiplex GX620				
	4697	Dell Computer			Optiplex GX620				
	4700	Dell Computer			Optiplex GX620				
	4701	Dell Computer			Optiplex GX620				
	4702	Dell Computer			Optiplex GX620				
	4703	Dell Computer			Optiplex GX620				
	4705	Dell Computer			Optiplex GX620				
	4706	Dell Computer			Optiplex GX620				
	4707	Dell Computer			Optiplex GX620				
	4708	Dell Computer			Optiplex GX620				
	4709	Dell Computer			Optiplex GX620				
	4715	Dell Computer			Optiplex GX620				

\* 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-  
Exhibit 6 of 9

### TRANSFER

Date of Surplus: 6/24/14	Date Transfer Received:		
Department Name: Recorder of Deeds	Department Code: 1801	Department Transferring Asset:	
Point of Contact: Sandae	Phone Number: 881-3191	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
	N/A	VCR			HITACHI	213067			
	N/A	TV			SANYO MTS	7320726119694			
	N/A	MONITOR STAND			SAMSUNG	N/A			
	N/A	PHONE			STARPLUS DIGITAL	30295101			
	N/A	PHONE			CORTELCO	N/A			
	N/A	RECEIPT PRINTER			TLP-2844	41A033700725			
	4817	RECEIPT PRINTER			TLP-2844				
	4831	RECEIPT PRINTER			TLP-2844				
	4837	RECEIPT PRINTER			TLP-2844				
	N/A	RECEIPT PRINTER			TLP-2742	47477946			
	N/A	RECEIPT PRINTER			TLP-2742	47430968			
	N/A	RECEIPT PRINTER			TLP-2742	47430985			
	N/A	COMPUTER CABLES (50+)			N/A	N/A			
	N/A	BOOKS (20)			MO REVISED STATUES	N/A			
	N/A	BINDERS (14)			N/A	N/A			
	N/A	ADDING MACHINE			TI-5033 SUPERVIEW	T-0196B			
	N/A	PAPERTRAYS (2)			N/A	N/A			
	N/A	LARGE EASEL			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.

1. User Department send to Finance Department





# SURPLUS/TRANSFER DECLARATION FORM

## JACKSON COUNTY, MISSOURI

### SURPLUS

-DO NOT DUPLICATE-  
Exhibit 7 of 9

### TRANSFER

Date of Surplus: 6/24/14

Department Name: Recorder of Deeds

Point of Contact: Sandae

Please Check: Select only one  
 Surplus     Surplus

Transaction Date	Fixed Asset #	Asset Description	Disposition Code*	Model Year	Make/Model	Serial/Vin Number	Useful Life**	Purchase Date	Original Cost
		Cannon Microfilm Scanner 300				E001149			
		Cannon Microfilm Scanner 300				E002341			
		Kodak 3000 DSV				K4184-4607			
		Kodak 3000 DSV				K4163-5248			
		Xerox 2510 - old plat copier				7313565299			
		Optiplex GX620- computer				X11-45371			
		Typewriter							
		Dell Computer				X10-60256			
		Shredder X2							
		Adding Machine							
	14866	Receipt Printer							
	14814	Receipt Printer							
	14860	Receipt Printer							
		Cash Drawer X3							
		Cash Drawer							
		Optiplex GX620- computer				4721			
		Imaging Office System 7743							

\* 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-  
Exhibit 8 of 9

### TRANSFER

Date of Surplus: 6/24/14	Date Transfer Received:
Department Name: Recorder of Deeds	Department Transferring Asset:
Point of Contact: Sandae	Department Receiving Asset:
Phone Number: 881-3191	
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/V in Number	Useful Life**	Purchase Date	Original Cost
	4716	DELL COMPUTER			OPTPLEX GX620				
	4720	DELL COMPUTER			OPTPLEX GX620				
	4722	DELL COMPUTER			OPTPLEX GX620				
	4723	DELL COMPUTER			OPTPLEX GX620				
	N/A	DELL COMPUTER			OPTPLEX GX620	2LVNM91			
	4126	DELL COMPUTER			OPTPLEX GX280				
	4123	DELL COMPUTER			OPTPLEX GX280				
	4125	DELL COMPUTER			OPTPLEX GX280				
	3818	DELL COMPUTER			DIMENSION 4700				
	9116	DELL COMPUTER			DIMENSION 4700				
	4730	SAMSUNG MONITOR			SYNCMASER 204B				
	4736	SAMSUNG MONITOR			SYNCMASER 204B				
	4737	SAMSUNG MONITOR			SYNCMASER 204B				
	4853	SAMSUNG MONITOR			SYNCMASER 204B				
	4856	SAMSUNG MONITOR			SYNCMASER 204B				
	4858	SAMSUNG MONITOR			SYNCMASER 204B				
	N/A	COMPUTER MOUSE (11)			ASSORTED				
	N/A	KEYBOARDS (14)			ASSORTED				

\* 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

