



PROPERTY DISPOSAL REPORT

DATE: 01/07/2026

To: Purchasing Department, Attention: Fixed Asset Property Manager

From: 211101, Sheriff's Office Anthony Miranda
Department No. & Name, Department Asset Custodian Authorized Signature

Re: Please amend the inventory to reflect the following change(s) due to DISPOSAL

METHOD OF DISPOSAL

- ☐ Auction _____
Date
- ☐ Theft _____ (Attach the Law Enforcement Agency Theft Report)
Date
- ☐ Destroyed by
☐ Natural Disaster _____
Date
☐ Traffic Accident _____
Date
- ☐ Trade-In _____
Date
- ☐ Donated _____ Agency receiving donation: _____
Date

Disposal of: N/A - Blodgett oven & Crescor heated cabin
FAID No. & Description

Reason for disposal: Non-functioning

Serial No./VIN #: _____

From: 211101, Sheriff's Office Location: Old Skills garage
Department No. & Name Building, Floor, Suite, or Room No.

Comments: _____

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS

PURCHASING DEPARTMENT USE ONLY

1/22/2026
Date Form Processed

Edward G. [Signature]
Fixed Asset Property Manager



GENERAL PROPERTY PRE-DISPOSAL DISCLOSURE FORM

Date: 01/07/2026

To: Purchasing Department, Attention: Fixed Asset Property Manager

From: [Signature] Anthony Miranda 211101, Sheriff's Office
Authorized Signature Print Name Department/Division

Re: Pre-disposal disclosure

Method of Disposal: Destroy Scrap Salvage Starting Bid \$

Please describe the item to the best of your knowledge. Please list any and all defects.

Disposal of FAID No: N/A Description: Blodgett oven & Crescor heated cabinet

Make: Model:

Serial/VIN: Year: Color: Silver / brushed metal

Description of Use: Food prep

Reason for Disposal: Non-functioning

Is this item currently in sound working condition? Yes X No

If no, please describe and list all defects.

Other:

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[Signature]
Fixed Asset Property Manager



