



THE COUNTY OF GALVESTON

FRANK RODRIGUEZ
PURCHASING AGENT

ASHLEY CLARK
ASST. PURCHASING AGENT

COUNTY COURTHOUSE
722 Moody (21st Street), Fifth (5th) Floor
Galveston, Texas 77550
(409) 770-5371

March 16, 2026

Honorable County Judge
And Commissioners' Court
County Courthouse
Galveston, Texas

Re: Disposal of Salvage or Surplus Property

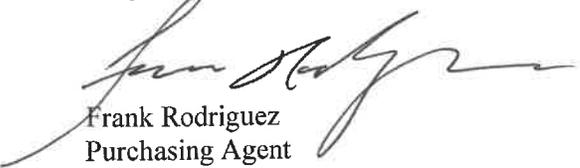
Gentlemen,

It is requested that authorization be granted to dispose of the salvage and/or surplus property items represented on the attached awaiting disposal (AD) list. This request is per the instructions outlined in the Texas Local Government Code, section 263.152, Disposition.

These items will be placed on the GovDeals website or other authorized means of disposal within 30 days after authorization is granted and efforts to transfer them to other departments have been exhausted.

Your consideration in this matter will be greatly appreciated.

Respectfully submitted,


Frank Rodriguez
Purchasing Agent
County of Galveston

Nolan, Edward

From: Nolan, Edward
Sent: Thursday, March 5, 2026 4:25 PM
To: Dickey, Tammy
Cc: Perez, Jacquelyn
Subject: Agenda request for commissioners court 3/16/2026: 172111 - Fleet surplus 20260316
Attachments: 172111 - Fleet surplus 20260316.pdf

Good afternoon,

Could we please place the following assets on the next available commissioners court appropriate removal as surplus: (172111 - Fleet surplus 20260316.pdf):

#	FAID	Unit	VIN	Desc	Notes
1	27156	TR9	17XFG352651055084	2005 TEXAS BRAGG GOOSENECK 35' Trailer	Age of asset / been replaced
2	30471	C5918	3FRXF7FD9AV254317	2010 FORD F750 Dump Truck 6-8 Yard	125,435 miles / Age of asset / been replaced / bed does not raise com
3	30826	C2111	1FTFW1CF1BFA87843	2011 FORD F150 PICKUP	117,746 miles / HARVEY-DAMAGED // milage / transmission needs rebuild / r
4	32193	C3733	1GAZGNFG1H1208133	2017 CHEVROLET EXPRESS 3500 VAN	80,325 milage / age of asset / milage /
5	32325	C7813	1FTEW1CB9JKC88453	2018 FORD F150 PICKUP	82,668 miles / age of asset / milage / r
6	32365	C3804	1C4BJWDG9JL908379	2018 JEEP WRANGLER	87,446 miles / age of asset / milage / r on / missing interior panels
7	32366	C3803	1C4BJWDG7JL908607	2018 JEEP WRANGLER	112,131 miles / age of asset / milage /
8	32770	C3008	1GNLCDEC7LR243990	2020 CHEVROLET TAHOE 2WD	96,221 milage / age of asset / milage / attached / poor tire condition
9	32821	C3015	1FMJU1GT8LEA40389	2020 CHEVROLET EXPEDITION	127,280 miles / age of asset / milage / low voltage light on / check engine light on / push bar brackets present / no c
10	30816	C7101	1FT8W3BT5BEB90684	2011 FORD F350	136,564 MILES / BAD BATTERIES / MA
11	32228	C4741	1GNLCDEC5HR239119	2017 CHEVROLET TAHOE	155,180 MILES / PASS SEAT STAINED /
12	32238	C1605	1FM5K8AR1HGD06554	2016 FORD EXPLORER	98,790 MILES / CLEAR COAT PEELING /
13	32364	C3818	1C4BJWDG3JL899288	2018 JEEP WRANGLER	76,624 MILES / STICKY BRAKES / CRAC

Thanks!

**PURCHASING
DEPARTMENT**



Edward Nolan

Sourcing Manager - Assets

📍 722 Moody, 5th floor, Galveston, TX 77550

☎ Main:409/770-5417

✉ Edward.Nolan@co.galveston.tx.us

🌐 Galvestoncountytx.gov

Ensuring Fair Access, Real Value, and Local Impact in County Purchasing

#	FAID	Unit	VIN	Desc	Notes
1	27156	TR9	17XFG352651055084	2005 TEXAS BRAGG GOOSENECK 35' Trailer	Age of asset / been replaced
2	30471	C5918	3FRXF7FD9AV254317	2010 FORD F750 Dump Truck 6-8 Yard	125,435 miles / Age of asset / been replaced / clutch needs replacement / bed does not raise completely
3	30826	C2111	1FTFW1CF1BFA87843	2011 FORD F150 PICKUP	117,746 miles / HARVEY-DAMAGED // age of asset / replaced / high mileage / transmission needs rebuild / no rear bumper
4	32193	C3733	1GAZGNFG1H1208133	2017 CHEVROLET EXPRESS 3500 VAN	80,325 mileage / age of asset / mileage / replaced
5	32325	C7813	1FTEW1CB9JKC88453	2018 FORD F150 PICKUP	82,668 miles / age of asset / mileage / replaced
6	32365	C3804	1C4BJWDG9JL908379	2018 JEEP WRANGLER	87,446 miles / age of asset / mileage / replaced / check engine light on / missing interior panels
7	32366	C3803	1C4BJWDG7JL908607	2018 JEEP WRANGLER	112,131 miles / age of asset / mileage / replaced / low tire light on
8	32770	C3008	1GNLCDEC7LR243990	2020 CHEVROLET TAHOE 2WD	96,221 mileage / age of asset / mileage / replaced / push bars still attached / poor tire condition
9	32821	C3015	1FMJU1GT8LEA40389	2020 CHEVROLET EXPEDITION	127,280 miles / age of asset / mileage / replaced / engine rattles / low voltage light on / check engine light on / orange wrench light on / push bar brackets present / no center console
10	30816	C7101	1FT8W3BT5BEB90684	2011 FORD F350	136,564 MILES / BAD BATTERIES / MAJOR DAMAGE FRONT FENDER
11	32228	C4741	1GNLCDEC5HR239119	2017 CHEVROLET TAHOE	155,180 MILES / PASS SEAT STAINED / CENTER CONSOLE STUCK
12	32238	C1605	1FM5K8ARIHGD06554	2016 FORD EXPLORER	98,790 MILES / CLEAR COAT PEELING / CARPET RIPPED
13	32364	C3818	1C4BJWDG3JL899288	2018 JEEP WRANGLER	76,624 MILES / STICKY BRAKES / CRACK FRONT WINDSHIELD

2/25/26 9:40 AM



ASSET DISPOSAL REPORT

DATE: 2/25/26

To: Purchasing Department, Attention: Fixed Asset Property Manager

From: 172111 / FLEET MGMT

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

- Options for disposal method: Auction, Theft, Destroyed by (Natural Disaster, Traffic Accident), Trade-In, Donated.

Disposal of: 27156 TEXAS BRAGG TRAILER 35'

FAID No.

Reason for disposal: AGE OF ASSET, ASSET HAS BEEN REPLACED

Serial No./VIN #: 17XFG352651055084

From: 172111 FLEET MGMT

Department No. & Name

Location: 2875 NICHOLAS AVE DICKINSON

Building, Floor, Suite, or Room No.

Comments:

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS

PURCHASING DEPARTMENT USE ONLY

Date Form Processed: 2/27/2026

Signature of Fixed Asset Property Manager



FLEET PRE-AUCTION DISCLOSURE FORM

DATE: 2/25/2026

To: Purchasing Department, Attention: Fixed Asset Property Manager

From: *Elizabeth Bryant* ELIZABETH BRYANT 172111/FLEET MGMT
Signature Print Name Department/Division

Re: Pre-auction vehicle disclosure

Starting Bid:

Disposal of FAID No: 27156 Description: 2005 TEXAS BRAGG TRAILER 35'

Unit # TR9 Serial/VIN: 17XFG352651055084 Mileage: N/A

Reason for Disposal: AGE / ~~MILEAGE~~ ASSET HAS BEEN REPLACED

Has this vehicle ever been in a wreck? Yes No If Yes, what year. _____

What type of damaged resulted from wreck? _____

List any engine issues: _____

List any transmission issues: _____

List any fluid leaks (oil, fuel, radiator, transmission, etc.) _____

Are all tires road-worthy? Yes No If No, please explain: _____

Is there a spare tire? Yes No Is the full jack present? Yes No

Other: PLEASE REFERENCE FINAL INSPECTION REPORT

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS

PURCHASING DEPARTMENT USE ONLY

2/27/2026
Date Form Processed

Edward J. [Signature]
Fixed Asset Property Manager

Generic Inspection Form

Inventory ID: **TR9**

Asset Number **27156**

Anticipated Sale Price:

Short Description: **2005 TEXAS BRAGG 35' GOOSENECK TRAILER**

Year **2005**

Manufacturer **TEXAS BRAGG**

Model **GOOSENECK**

Please fill in or check if apply

Long Description:

This Equipment: Is Operable Is Not Operable For Parts Only Needs Repair The Condition is Unknown

Hours: _____ This equipment was maintained every Hours Days

Serial # **17XFG352651055084**

Repairs needed: **TIRES ARE FAIR**

Description of Use

HAUL EQUIPMENT AND MATERIALS AS NEEDED

Color **BLACK** Cloth Vinyl Leather Metal Plastic Wood Rubber

Minor damage to: **CHRISTMAS SLED ON TRAILER**

Major damage to: _____

Size: Length: Feet: _____ Inches: _____ Width/Depth: Feet: _____ Inches: _____ Height: Feet: _____ Inches: _____

Men's Size: _____

Women's Size: _____

Additional Equipment: Manufacturer _____ Model _____

Serial # _____ Condition: Is Operable Needs repair Unknown Condition

Description: _____

Additional Equipment: Manufacturer _____ Model _____

Serial # _____ Condition: Is Operable Needs repair Unknown Condition

Description: _____

Additional Equipment: Manufacturer _____ Model _____

Serial # _____ Condition: Is Operable Needs repair Unknown Condition

Description: _____

Comments:

IDENTIFICATION TAG IS EXTREMELY WORN

THE ONLY IDENTIFICATION IS THE FAID TAGS

Location of Asset: **SFSC 2/4/2026**

For more information contact: _____



ASSET TRANSFER REQUEST

Date: 4/19/2024

To: Purchasing Department, Fixed Asset Property Manager

Transferor: Julie Diaz Julie Diaz Department / Division: 522020, Parks
(Authorized Asset Custodian Signature) (Print Name)

Receiver: Elizabeth Bryant Elizabeth Bryant Department / Division: 172111, Fleet
(Authorized Asset Custodian Signature) (Print Name)

RE: Please amend the inventory to reflect the following change(s) due to TRANSFER

Transfer 27156 Unit # TR9 Description 2005 TEXAS BRAGG 35' Trailer Serial/VIN 55084
(FAID#, last 5 digits) (last 5 digits)

From 522020, Parks Location SNFE/SF05
(Department/Division Name) (Building, Floor, Suite or Room No)

To 172111, Fleet Location SF Service Center 5101 AVE H
(Department/Division Name) (Building, Floor, Suite or Room No)

Reason for Transfer AGE OF ASSET

Transfer 26847 Unit # TR19 Description 2001 AMERITRAIL 32' Trailer Serial/VIN 23107
(FAID#, last 5 digits) (last 5 digits)

From 522020, Parks Location BOLV/BP04
(Department/Division Name) (Building, Floor, Suite or Room No)

To 172111, Fleet Location SF Service Center 5101 AVE H
(Department/Division Name) (Building, Floor, Suite or Room No)

Reason for Transfer AGE OF ASSET

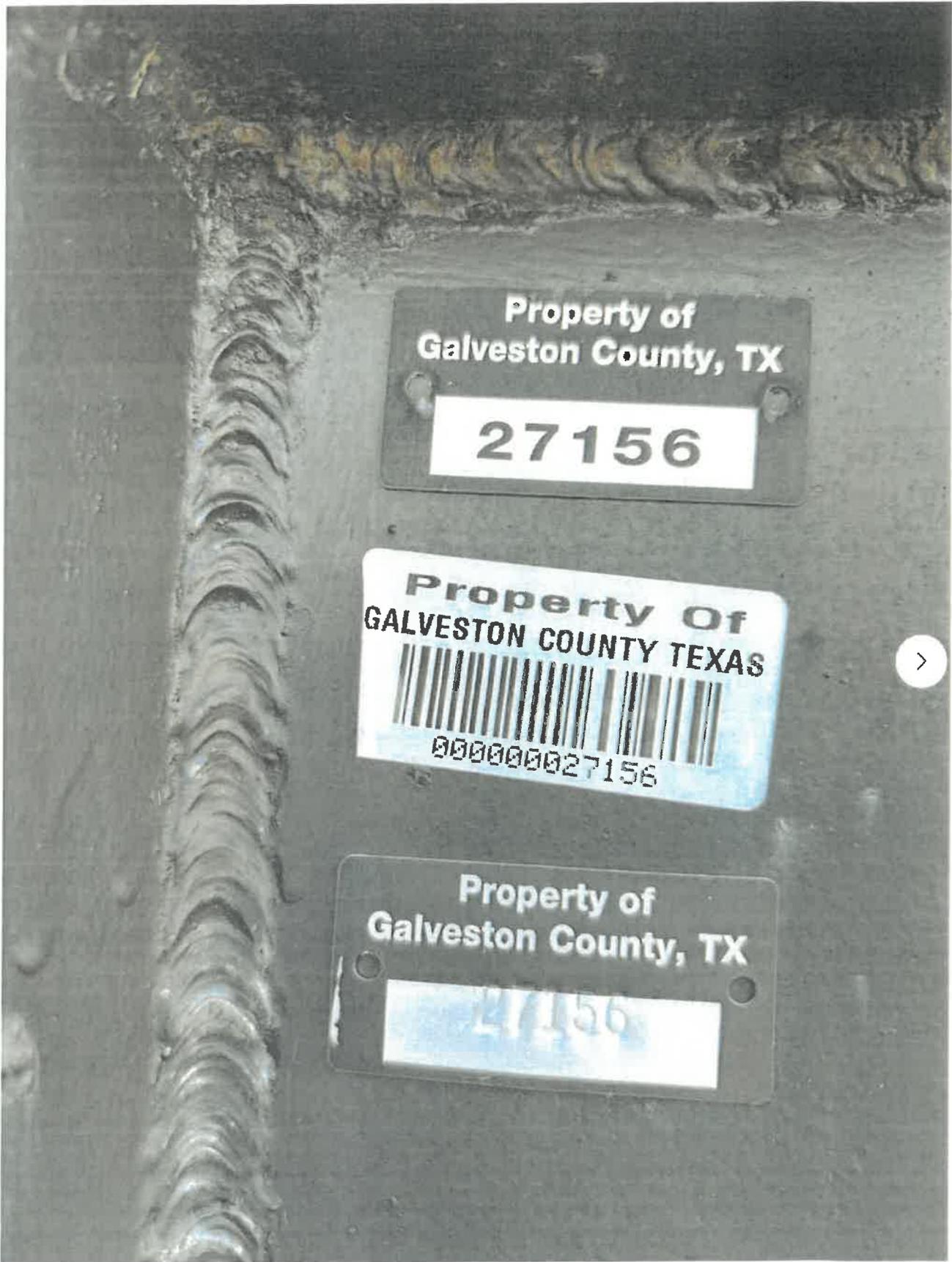
PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS

PURCHASING DEPARTMENT USE ONLY

5/10/2024
Date Form Processed

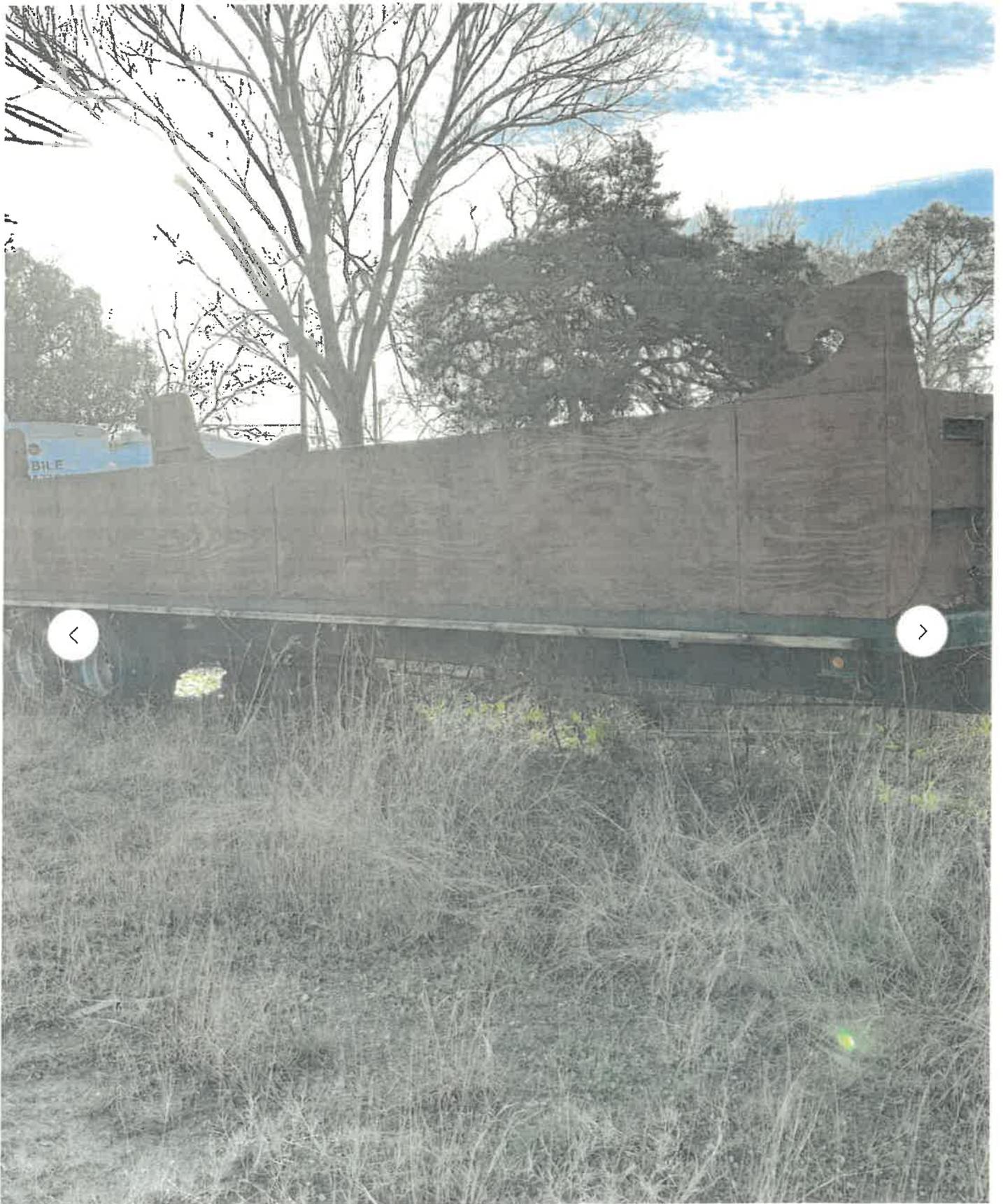
[Signature]
Fixed Asset Property Manager

on Fixed Assets/FA Form/FA-02, Transfer
revised 10/05/2010











ASSET DISPOSAL REPORT

DATE: 2/25/2026

To: Purchasing Department, Attention: Fixed Asset Property Manager

From: 172111 / FLEET MGMT

Department No. & Name, Department Asset Custodian Authority Signature

Handwritten signature

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

METHOD OF DISPOSAL

Auction Date

Theft Date (Attach the Law Enforcement Agency Theft Report)

Destroyed by: Natural Disaster Date, Traffic Accident Date

Trade-In Date

Donated Date Agency receiving donation:

Disposal of: 30471 FORD F750 DUMP TRUCK FAID No.

Reason for disposal: AGE OF ASSET, ASSET HAS BEEN REPLACED

Serial No./VIN #: 3FRXF7FD9AV254317

From: 172111 FLEET MGMT Department No. & Name

Location: 2875 NICHOLAS AVE DICKINSON Building, Floor, Suite, or Room No.

Comments:

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS

PURCHASING DEPARTMENT USE ONLY

2/27/2026 Date Form Processed

Handwritten signature: Edward J. ... Fixed Asset Property Manager



FLEET PRE-AUCTION DISCLOSURE FORM

DATE: 2/25/2026

To: Purchasing Department, Attention: Fixed Asset Property Manager

From: [Signature] ELIZABETH BRYANT 172111/FLEET MGMT
Signature Print Name Department/Division

Re: Pre-auction vehicle disclosure

Starting Bid:

Disposal of FAID No: 30471 Description: 2010 FORD F750 DUMP TRUCK

Unit # C5918 Serial/VIN: 3FRXF7FD9AV254317 Mileage: 122722

Reason for Disposal: AGE / MILAGE / ASSET HAS BEEN REPLACED

Has this vehicle ever been in a wreck? Yes No If Yes, what year.

What type of damaged resulted from wreck?

List any engine issues:

List any transmission issues:

List any fluid leaks (oil, fuel, radiator, transmission, etc.)

Are all tires road-worthy? Yes No If No, please explain:

Is there a spare tire? Yes No Is the full jack present? Yes No

Other: PLEASE REFERENCE FINAL INSPECTION REPORT

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS

PURCHASING DEPARTMENT USE ONLY

2/27/2026
Date Form Processed

[Signature]
Fixed Asset Property Manager

7/9/25 9:11AM

Heavy Truck Inspection Form

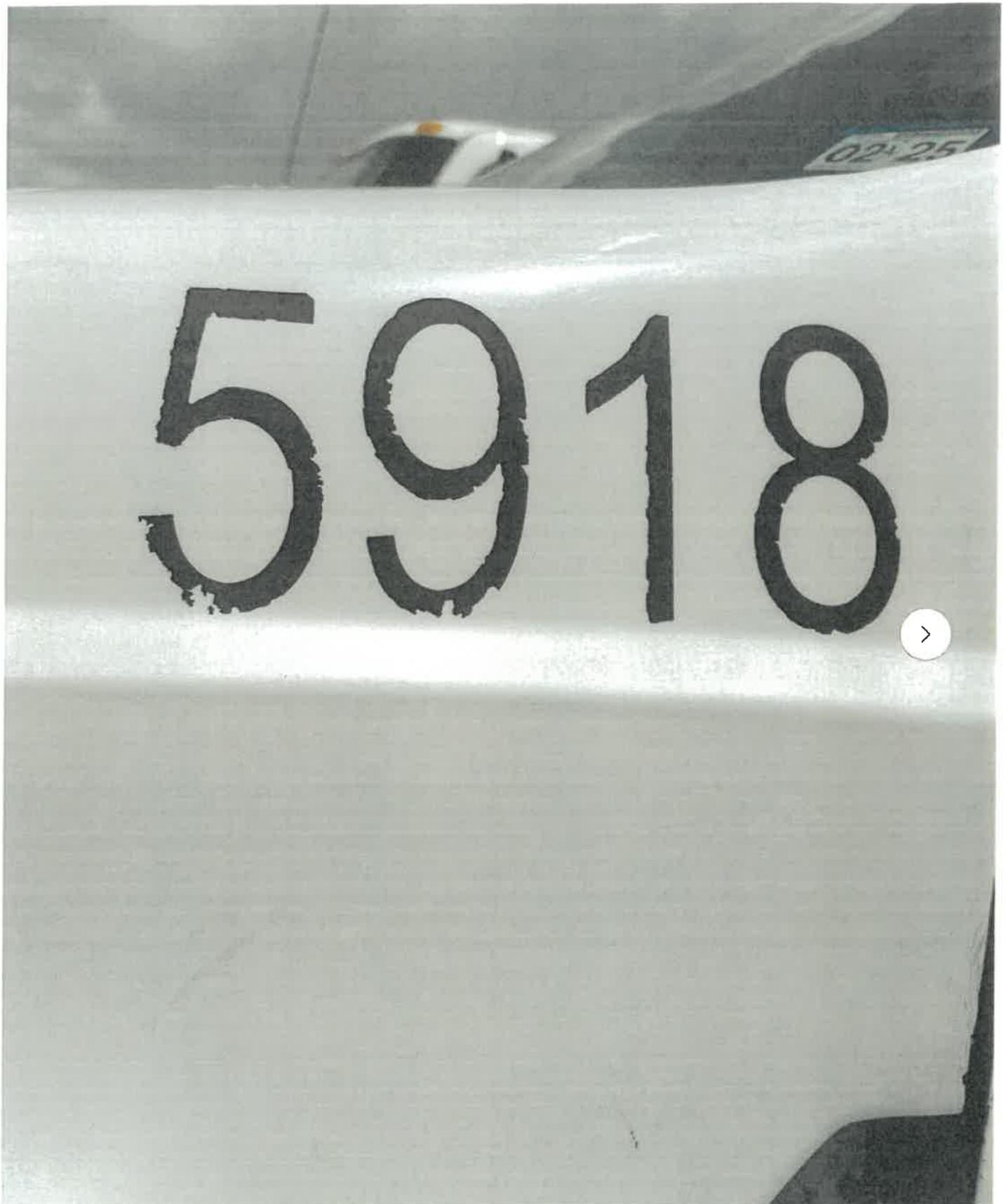
Inventory ID: C5918	Asset Number: 30471	Fair Market Value:																	
Short Description: Year <u>2010</u> Manufacturer <u>FORD</u> Model <u>F750 DUMP TRUCK</u>																			
VIN: <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="padding: 2px;">3</td><td style="padding: 2px;">F</td><td style="padding: 2px;">R</td><td style="padding: 2px;">X</td><td style="padding: 2px;">F</td><td style="padding: 2px;">7</td><td style="padding: 2px;">F</td><td style="padding: 2px;">D</td><td style="padding: 2px;">9</td><td style="padding: 2px;">A</td><td style="padding: 2px;">V</td><td style="padding: 2px;">2</td><td style="padding: 2px;">5</td><td style="padding: 2px;">4</td><td style="padding: 2px;">3</td><td style="padding: 2px;">1</td><td style="padding: 2px;">7</td> </tr> </table> Title Restriction: <input type="checkbox"/> Y <input type="checkbox"/> N			3	F	R	X	F	7	F	D	9	A	V	2	5	4	3	1	7
3	F	R	X	F	7	F	D	9	A	V	2	5	4	3	1	7			
Mileage/Odometer: <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="padding: 2px;">1</td><td style="padding: 2px;">2</td><td style="padding: 2px;">5</td><td style="padding: 2px;">4</td><td style="padding: 2px;">3</td><td style="padding: 2px;">5</td> </tr> </table> Odometer Accurate <input type="checkbox"/> Y <input type="checkbox"/> N:			1	2	5	4	3	5											
1	2	5	4	3	5														
Long Description: Primary Use for Vehicle: <u>DUMP TRUCK</u> GVW: <u>33,000#</u>																			
This Vehicle: <input checked="" type="checkbox"/> Starts <input type="checkbox"/> Starts with a Boost & <input type="checkbox"/> Is Operable <input type="checkbox"/> Is Not Operable <input type="checkbox"/> For Parts Only																			
Date Removed From Service: Maintenance Records: <input type="checkbox"/> Available <input type="checkbox"/> Not Available For Inspection																			
Engine Manufacture: <u>CUMMINS</u> Engine: <u>6.7L, V6</u> <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Diesel																			
This vehicle was maintained every <input type="checkbox"/> Days <input type="checkbox"/> Hours <input type="checkbox"/> Miles # of Axles <u>2</u>																			
Engine Condition: <input checked="" type="checkbox"/> Is operable <input type="checkbox"/> Needs repair <input type="checkbox"/> Is in Unknown Condition Jake Brake: <input type="checkbox"/> Yes <input type="checkbox"/> No																			
Engine Repairs needed:																			
Transmission Manufacture: <u>FORD ??</u> <input type="checkbox"/> Automatic <input checked="" type="checkbox"/> Manual <u>6</u> Speed																			
Transmission Condition is: <input type="checkbox"/> Operable <input checked="" type="checkbox"/> Needs Repair <input type="checkbox"/> Unknown <input type="checkbox"/> Rebuilt (Date:)																			
Transmission Repairs Needed: <u>CLUTCH NEEDS REPLACEMENT</u>																			
Exterior: Color <u>WHITE</u> Windows: <input type="checkbox"/> No Cracked Glass <input checked="" type="checkbox"/> Cracked <small>BULLSEYE ON WINDSHIELD</small>																			
Minor: <input checked="" type="checkbox"/> Dents <input checked="" type="checkbox"/> Scratches <input checked="" type="checkbox"/> Dings Tire Condition: <input type="checkbox"/> Low <input type="checkbox"/> Flat																			
Damage to: <u>BED DOES NOT RAISE COMPLETELY; PEELING CLEARCOAT</u>																			
Additional Damage to: <u>CRACKED HOOD & GRILL; TOOL BOX DOOR MISSING</u>																			
Decals: <input type="checkbox"/> None <input type="checkbox"/> Have been sprayed <input checked="" type="checkbox"/> Have been Removed & <input checked="" type="checkbox"/> Impressions Remain <input type="checkbox"/> No Impressions																			
Capacity: <u>9.6 CU YD</u> Loader: <input type="checkbox"/> Front <input type="checkbox"/> Side Electronic Tarp: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Condition:																			
Interior: Color <u>GRAY</u> <input type="checkbox"/> Cloth <input checked="" type="checkbox"/> Vinyl <input type="checkbox"/> Leather																			
Damage to Seats: <u>RIPPED, TORN, WORN & STAINED</u>																			
Damage to Dash/Floor: <u>WORN & STAINED FLOOR; CRACKED AND BROKEN DASH</u>																			
Radio: Brand <u>STOCK</u> <input type="checkbox"/> AM <input checked="" type="checkbox"/> AM/FM <input type="checkbox"/> AM/FM Cassette <input type="checkbox"/> AM/FM CD																			
<input checked="" type="checkbox"/> Cruise Control <input checked="" type="checkbox"/> Tilt Steering <input type="checkbox"/> Remote Mirrors Airbags: <input type="checkbox"/> Driver's Side <input type="checkbox"/> Dual																			
<input checked="" type="checkbox"/> AC <input type="checkbox"/> No AC AC Condition: <input checked="" type="checkbox"/> Cold <input type="checkbox"/> Unknown Power: <input type="checkbox"/> Windows <input type="checkbox"/> Doorlocks <input checked="" type="checkbox"/> Steering <input type="checkbox"/> Seats																			
Additional Equipment: Manufacturer: <u>DAVIS</u> Model: <u>D/T 6-10</u>																			
Serial # <u>V100073B5824228</u> Description: <u>9.6 CU YD DUMP BED</u>																			
Equipment Condition: <input type="checkbox"/> Is operable <input type="checkbox"/> Needs repair <input type="checkbox"/> Is in Unknown Condition																			
Other Equipment:																			
Location of Asset: <u>DSY 6/30/2025</u>																			
For more information contact:																			

The County of Galveston

Jeff's Auction Checklist



UNIT#	REMARKS	DATE
	C5918	2/12/26
LICENSE PLATE NUMBER	157-7204	
DESTROYED LICENSE PLATE AND REGISTRATION STICKER	yes	
TELEMATICS REMOVAL	yes	
TELEMATICS SERIAL NUMBER	N/A	
DECALS REMOVED	yes	
RADIO REMOVED	N/A	
RADIO SERIAL NUMBER	N/A	
LIGHTS (POLICE) REMOVED	N/A	
FIRE EXTINGUISHER REMOVED	yes	
TOOL BOX REMOVED	N/A	↓
FUEL CELL REMOVED	N/A	2/12/26
MECHANIC PRINT NAME AND SIGNATURE AND DATE	matthew landry	mm
MANAGER SIGNATURE AND DATE		2-12-2026













ASSET DISPOSAL REPORT

DATE: 2/25/2026

To: Purchasing Department, Attention: Fixed Asset Property Manager

From: 172111 / FLEET MGMT

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: 30826 FORD F150

FAID No.

Reason for disposal: AGE OF ASSET, ASSET HAS BEEN REPLACED

Serial No./VIN #: 1FTFW1CF1BFA87843

From: 172111 FLEET MGMT

Department No. & Name

Location: 2875 NICHOLAS AVE DICKINSON

Building, Floor, Suite, or Room No.

Comments: _____

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS

PURCHASING DEPARTMENT USE ONLY

2/27/2026
Date Form Processed

Edward J. [Signature]
Fixed Asset Property Manager



FLEET PRE-AUCTION DISCLOSURE FORM

DATE: 2/25/2026

To: Purchasing Department, Attention: Fixed Asset Property Manager

From: [Signature] ELIZABETH BRYANT 172111/FLEET MGMT
Signature Print Name Department/Division

Re: Pre-auction vehicle disclosure

Starting Bid:

Disposal of FAID No: 30826 Description: 2011 FORD F150

Unit # C2111 Serial/VIN: 1FTFW1CF1BFA87843 Mileage: 113486

Reason for Disposal: AGE / MILAGE / ASSET HAS BEEN REPLACED

Has this vehicle ever been in a wreck? Yes No If Yes, what year.

What type of damaged resulted from wreck?

List any engine issues:

List any transmission issues:

List any fluid leaks (oil, fuel, radiator, transmission, etc.)

Are all tires road-worthy? Yes No If No, please explain:

Is there a spare tire? Yes No Is the full jack present? Yes No

Other: PLEASE REFERENCE FINAL INSPECTION REPORT

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PURCHASING DEPARTMENT USE ONLY

2/27/2026
Date Form Processed

[Signature]
Fixed Asset Property Manager

Vehicle Inspection Form

Inventory ID: C2111	Asset Number: 30826	Fair Market Value: _____																	
Short Description: Year 2011 Make FORD Model F150 XL																			
VIN: <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr><td>1</td><td>F</td><td>T</td><td>F</td><td>W</td><td>1</td><td>C</td><td>F</td><td>1</td><td>B</td><td>F</td><td>A</td><td>8</td><td>7</td><td>8</td><td>4</td><td>3</td></tr> </table> Title Restriction: <input type="checkbox"/> Y <input type="checkbox"/> N			1	F	T	F	W	1	C	F	1	B	F	A	8	7	8	4	3
1	F	T	F	W	1	C	F	1	B	F	A	8	7	8	4	3			
Odometer: <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr><td>1</td><td>1</td><td>7</td><td>7</td><td>4</td><td>6</td></tr> </table> <input type="checkbox"/> Miles <input type="checkbox"/> Kilometers Odometer Accurate <input type="checkbox"/> Y <input type="checkbox"/> N: _____			1	1	7	7	4	6											
1	1	7	7	4	6														
Long Description:																			
This Vehicle: <input type="checkbox"/> Starts <input type="checkbox"/> Starts with a Boost & <input type="checkbox"/> Runs/Driveable <input type="checkbox"/> Engine Runs <input type="checkbox"/> Does Not Run <input type="checkbox"/> For Parts Only																			
Engine- Type: 5.0L, V8 <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Diesel Engine <input type="checkbox"/> Propane/Natural Gas <input type="checkbox"/> Gas/Electric Hybrid																			
Engine Condition: <input type="checkbox"/> Runs <input checked="" type="checkbox"/> Needs repair <input checked="" type="checkbox"/> is in unknown condition																			
Repairs needed: <small>DID NOT START WITH BOOST; SERVICE ADVANCE TRNG LIGHT ON; WATER TEMP LIGHT ON; STARTING SYSTEM FAULT LIGHT ON; BLUE WRENCH ON</small>																			
This vehicle was maintained every _____ <input type="checkbox"/> Days <input type="checkbox"/> Hours <input type="checkbox"/> Miles																			
Date Removed From Service: _____ Maintenance Records: <input type="checkbox"/> Available <input type="checkbox"/> Not Available For Inspection																			
Transmission: <input checked="" type="checkbox"/> Automatic <input type="checkbox"/> Manual Speed Condition: <input type="checkbox"/> Operable <input checked="" type="checkbox"/> Needs repair <input type="checkbox"/> Is Unknown Condition																			
Repairs Needed: TRANSMISSION NEEDS REBUILD OR REPLACEMENT																			
Drivetrain: <input checked="" type="checkbox"/> 2 Wheel Drive <input type="checkbox"/> 4 Wheel Drive Condition: _____																			
Exterior: Color: WHITE Windows: <input checked="" type="checkbox"/> No Cracked Glass <input type="checkbox"/> Cracked _____																			
Minor: <input checked="" type="checkbox"/> Dents <input checked="" type="checkbox"/> Scratches <input type="checkbox"/> Dings Tire Condition: FAIR Tread: _____ #Flat _____ Hubcaps # _____																			
Major Damage to: _____																			
Additional Damage: NO TAILGATE; NO REAR BUMPER																			
Decals: <input type="checkbox"/> None <input type="checkbox"/> Have Been Sprayed or <input checked="" type="checkbox"/> Have been Removed & <input type="checkbox"/> Impressions Remain <input type="checkbox"/> No Impressions																			
Emergency equip: <input type="checkbox"/> None <input checked="" type="checkbox"/> Has been removed & <input checked="" type="checkbox"/> There are holes in the exterior <input type="checkbox"/> There are no holes																			
Interior: Color GRAY <input checked="" type="checkbox"/> Cloth <input type="checkbox"/> Vinyl <input type="checkbox"/> Leather																			
Damage to Seats: WORN & STAINED; GLUE REMNANTS ON DASH																			
Damage to Dash/Floor: HOLES IN FLOOR & DASH; INTERIOR PANELS MISSING																			
Radio: <input checked="" type="checkbox"/> Stock or <input type="checkbox"/> Brand & Model: _____ <input type="checkbox"/> AM <input type="checkbox"/> AM/FM <input type="checkbox"/> AM/FM Cassette <input checked="" type="checkbox"/> AM/FM CD																			
<input checked="" type="checkbox"/> AC (Condition: <input type="checkbox"/> Cold <input checked="" type="checkbox"/> Unknown) <input type="checkbox"/> No AC Air Bags: <input type="checkbox"/> Driver's Side <input checked="" type="checkbox"/> Dual																			
<input type="checkbox"/> Cruise Control <input type="checkbox"/> Tilt Steering <input checked="" type="checkbox"/> Remote Mirrors <input type="checkbox"/> Climate Control																			
Power: <input checked="" type="checkbox"/> Steering <input type="checkbox"/> Windows <input checked="" type="checkbox"/> Door Locks <input type="checkbox"/> Seats																			
Additional Equipment: SPOTLIGHT (WORKS)																			
Manufacturer _____ Model _____ Serial # _____																			
<input type="checkbox"/> Tool Box <input type="checkbox"/> Light Bar <input type="checkbox"/> Ladder Rack <input type="checkbox"/> Utility Body: Brand _____ <input type="checkbox"/> Hitch: Type _____																			
Location of Asset: DSY 6/11/2025																			
For more information contact: _____																			
Reminder: Do not close items on or surrounding a Holiday, on Friday nights, or Weekends. Stagger closing times by 10 minutes.																			

2/18/26 8:14 AM



The County of Galveston

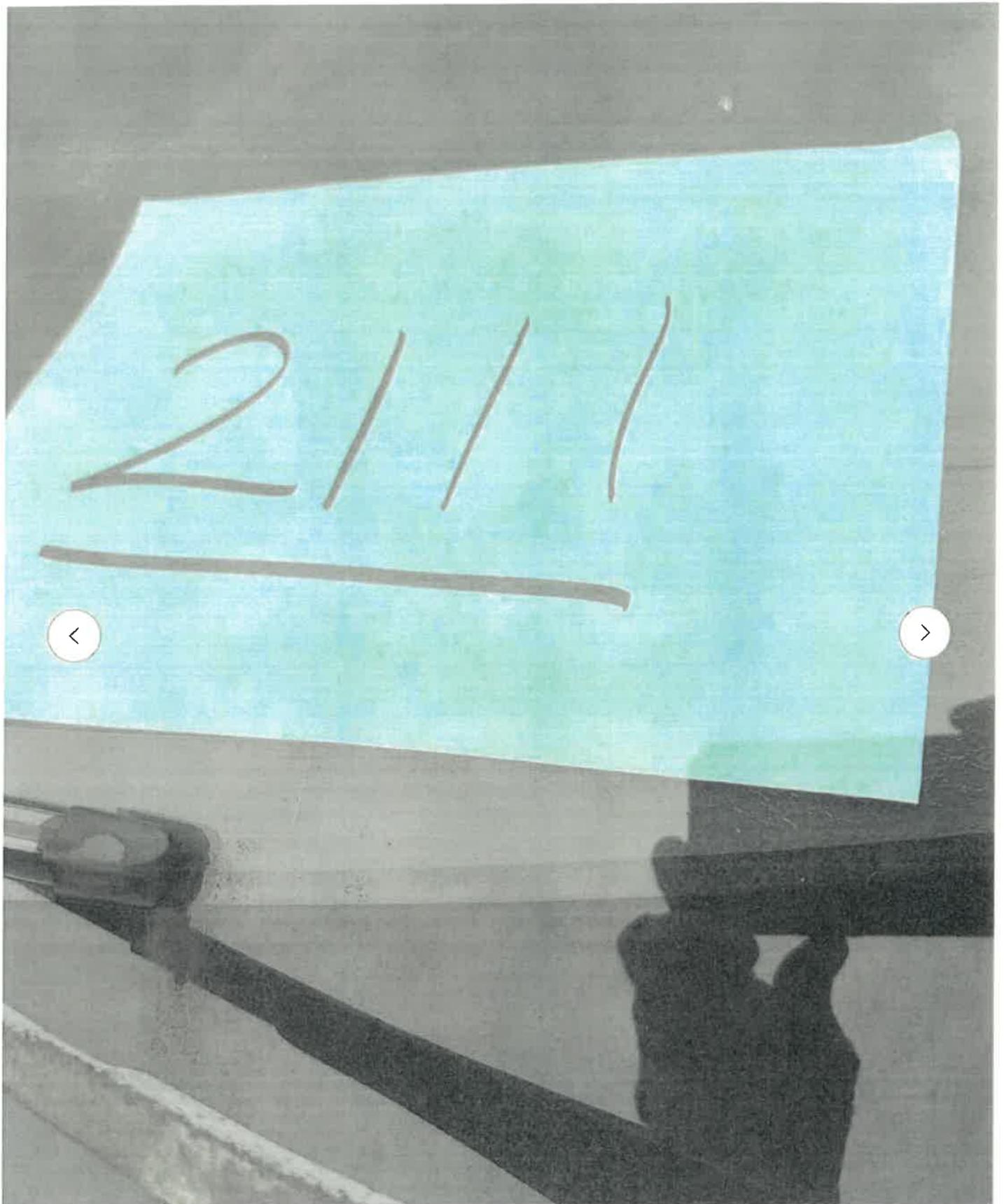
Jeff's Auction Checklist

	REMARKS	DATE
UNIT#	C2111	1/29/2024
LICENSE PLATE NUMBER	N/A	
DESTROYED LICENSE PLATE AND REGISTRATION STICKER	YES	
TELEMATICS REMOVAL	YES	
TELEMATICS SERIAL NUMBER	N/A	
DECALS REMOVED	YES	
RADIO REMOVED	YES	
RADIO SERIAL NUMBER	N/A	
LIGHTS (POLICE) REMOVED	NA	
FIRE EXTINGUISHER REMOVED	NA	
TOOL BOX REMOVED	NA	
FUEL CELL REMOVED	N/A	

MECHANIC PRINT NAME AND SIGNATURE AND DATE Chelsea Crain On Air 1/29/2024

MANAGER SIGNATURE AND DATE [Signature] 1-29-2024

27









11/10/2020





ASSET DISPOSAL REPORT

DATE: 2/25/2026

To: Purchasing Department, Attention: Fixed Asset Property Manager

From: 172111 / FLEET MGMT

Department No. & Name, Department Asset Custodian Authorized Signature

[Handwritten 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: 32193 CHEVORLET EXPRESS 3500
FAID No.

Reason for disposal: AGE OF ASSET, ASSET HAS BEEN REPLACED

Serial No./VIN #: 1GAZGNFG1H1208133

From: 172111 FLEET MGMT
Department No. & Name

Location: 2875 NICHOLAS AVE DICKINSON
Building, Floor, Suite, or Room No.

Comments: _____

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS

PURCHASING DEPARTMENT USE ONLY

2/27/2026
Date Form Processed

[Handwritten Signature]
Fixed Asset Property Manager



FLEET PRE-AUCTION DISCLOSURE FORM

DATE: 2/25/2026

To: Purchasing Department, Attention: Fixed Asset Property Manager

From: [Signature] ELIZABETH BRYANT 172111/FLEET MGMT
signature Print Name Department/Division

Re: Pre-auction vehicle disclosure

Starting Bid:

Disposal of FAID No: 32193 Description: 2017 CHEVROLET EXPRESS 3500

Unit # C3733 Serial/VIN: 1GAZGNFG1H1208133 Mileage: 80323

Reason for Disposal: AGE / MILAGE / ASSET HAS BEEN REPLACED

Has this vehicle ever been in a wreck? Yes No If Yes, what year.

What type of damaged resulted from wreck?

List any engine issues:

List any transmission issues:

List any fluid leaks (oil, fuel, radiator, transmission, etc.)

Are all tires road-worthy? Yes No If No, please explain:

Is there a spare tire? Yes No Is the full jack present? Yes No

Other: PLEASE REFERENCE FINAL INSPECTION REPORT

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PURCHASING DEPARTMENT USE ONLY

2/27/2026
Date Form Processed

[Signature]
Fixed Asset Property Manager

Vehicle Inspection Form

Inventory ID: C3733	Asset Number: 32193	Fair Market Value:																	
Short Description: Year <u>2017</u> Make <u>CHEVROLET</u> Model <u>EXPRESS 3500</u>																			
VIN: <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr><td>1</td><td>G</td><td>A</td><td>Z</td><td>G</td><td>N</td><td>F</td><td>G</td><td>1</td><td>H</td><td>1</td><td>2</td><td>0</td><td>8</td><td>1</td><td>3</td><td>3</td></tr> </table> Title Restriction: <input type="checkbox"/> Y <input type="checkbox"/> N		1	G	A	Z	G	N	F	G	1	H	1	2	0	8	1	3	3	
1	G	A	Z	G	N	F	G	1	H	1	2	0	8	1	3	3			
Odometer: <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr><td>8</td><td>0</td><td>3</td><td>2</td><td>5</td><td></td></tr> </table> <input checked="" type="checkbox"/> Miles <input type="checkbox"/> Kilometers Odometer Accurate <input type="checkbox"/> Y <input type="checkbox"/> N: _____		8	0	3	2	5													
8	0	3	2	5															
Long Description:																			
This Vehicle: <input type="checkbox"/> Starts <input type="checkbox"/> Starts with a Boost & <input type="checkbox"/> Runs/Driveable <input type="checkbox"/> Engine Runs <input type="checkbox"/> Does Not Run <input type="checkbox"/> For Parts Only																			
Engine- Type: <u>6.0L, V8</u> <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Diesel Engine <input type="checkbox"/> Propane/Natural Gas <input type="checkbox"/> Gas/Electric Hybrid																			
Engine Condition: <input checked="" type="checkbox"/> Runs <input type="checkbox"/> Needs repair <input type="checkbox"/> is in unknown condition																			
Repairs needed: _____																			
This vehicle was maintained every _____ <input type="checkbox"/> Days <input type="checkbox"/> Hours <input type="checkbox"/> Miles																			
Date Removed From Service: _____ Maintenance Records: <input type="checkbox"/> Available <input type="checkbox"/> Not Available For Inspection																			
Transmission: <input checked="" type="checkbox"/> Automatic <input type="checkbox"/> Manual _____ Speed Condition: <input type="checkbox"/> Operable <input type="checkbox"/> Needs repair <input type="checkbox"/> Is Unknown Condition																			
Repairs Needed: _____																			
Drivetrain: <input type="checkbox"/> 2 Wheel Drive <input type="checkbox"/> 4 Wheel Drive Condition: _____																			
Exterior: Color: <u>WHITE</u> Windows: <input checked="" type="checkbox"/> No Cracked Glass <input type="checkbox"/> Cracked _____																			
Minor: <input checked="" type="checkbox"/> Dents <input checked="" type="checkbox"/> Scratches <input checked="" type="checkbox"/> Dings Tire Condition: <u>FAIR</u> Tread: _____ #Flat _____ Hubcaps # _____																			
Major Damage to: _____																			
Additional Damage: _____																			
Decals: <input type="checkbox"/> None <input type="checkbox"/> Have Been Sprayed or <input checked="" type="checkbox"/> Have been Removed & <input checked="" type="checkbox"/> Impressions Remain <input type="checkbox"/> No Impressions																			
Emergency equip: <input type="checkbox"/> None <input checked="" type="checkbox"/> Has been removed & <input checked="" type="checkbox"/> There are holes in the exterior <input type="checkbox"/> There are no holes																			
Interior: Color <u>GRAY</u> <input type="checkbox"/> Cloth <input checked="" type="checkbox"/> Vinyl <input type="checkbox"/> Leather																			
Damage to Seats: <u>WORN, TORN & STAINED</u>																			
Damage to Dash/Floor: <u>NORMAL WEAR & TEAR</u>																			
Radio: <input checked="" type="checkbox"/> Stock or <input type="checkbox"/> Brand & Model: _____ <input type="checkbox"/> AM <input checked="" type="checkbox"/> AM/FM <input type="checkbox"/> AM/FM Cassette <input type="checkbox"/> AM/FM CD																			
<input checked="" type="checkbox"/> AC (Condition: <input checked="" type="checkbox"/> Cold <input type="checkbox"/> Unknown) <input type="checkbox"/> No AC Air Bags: <input checked="" type="checkbox"/> Driver's Side <input checked="" type="checkbox"/> Dual																			
<input type="checkbox"/> Cruise Control <input type="checkbox"/> Tilt Steering <input checked="" type="checkbox"/> Remote Mirrors <input type="checkbox"/> Climate Control																			
Power: <input checked="" type="checkbox"/> Steering <input type="checkbox"/> Windows <input type="checkbox"/> Door Locks <input type="checkbox"/> Seats																			
Additional Equipment: <u>WINDOW CAGES STILL ATTACHED</u>																			
Manufacturer _____ Model _____ Serial # _____																			
<input type="checkbox"/> Tool Box <input type="checkbox"/> Light Bar <input type="checkbox"/> Ladder Rack <input type="checkbox"/> Utility Body: Brand _____ <input type="checkbox"/> Hitch: Type _____																			
Location of Asset: <u>DSY 2/11/2026</u>																			
For more information contact: _____																			
Reminder: Do not close items on or surrounding a Holiday, on Friday nights, or Weekends. Stagger closing times by 10 minutes.																			

2/18/26 9:28 AM

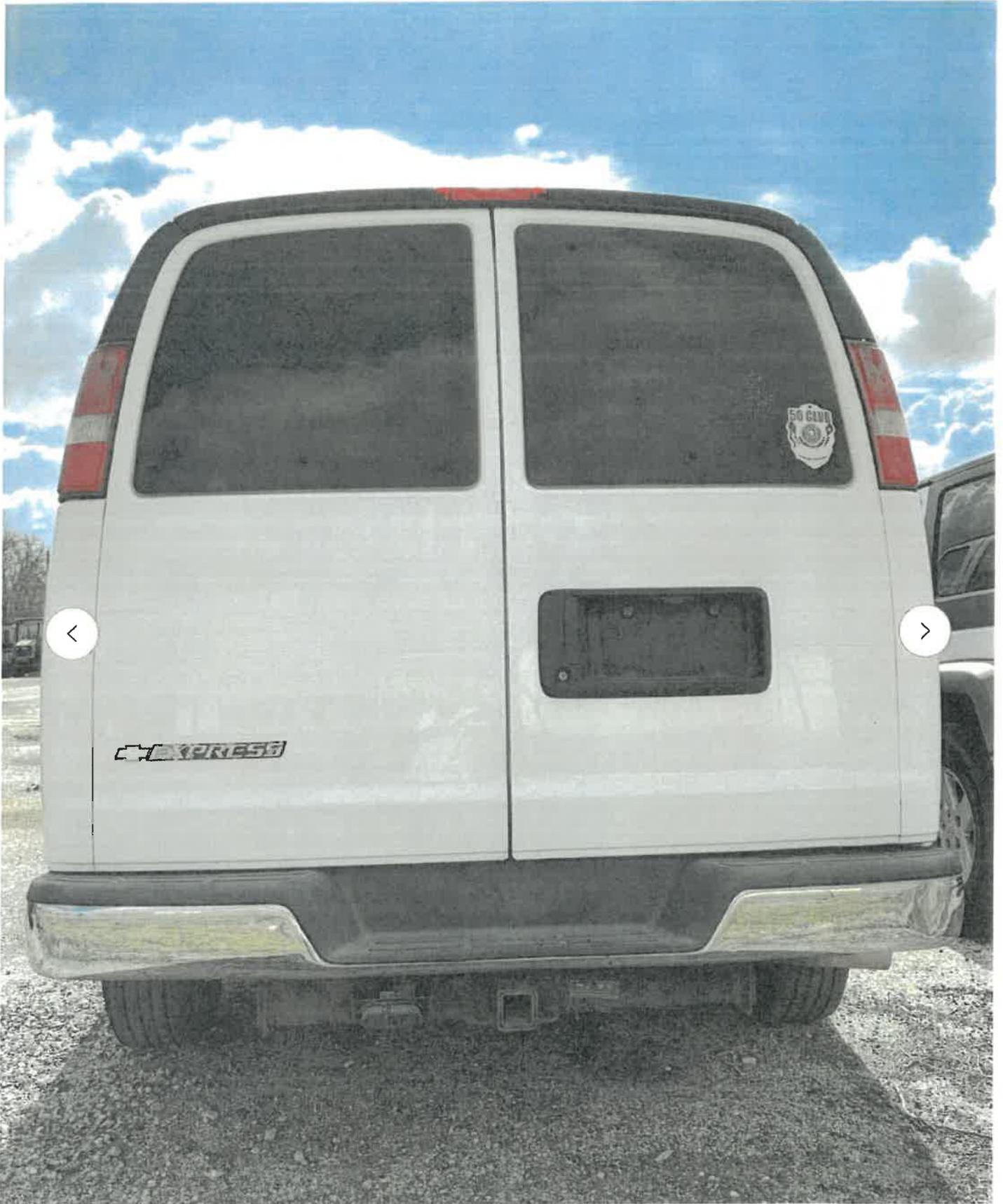


The County of Galveston
Jeff's Auction Checklist

	REMARKS	DATE
UNIT#	C3733	12-22-2015
LICENSE PLATE NUMBER		
DESTROYED LICENSE PLATE AND REGISTRATION STICKER	YES	
TELEMATICS REMOVAL	YES	
TELEMATICS SERIAL NUMBER	GPSY-EZW-295	
DECALS REMOVED	YES	
RADIO REMOVED	N/A	
RADIO SERIAL NUMBER	N/A	
LIGHTS (POLICE) REMOVED	YES	
FIRE EXTINGUISHER REMOVED	YES	
TOOL BOX REMOVED	N/A	
FUEL CELL REMOVED	N/A	
MECHANIC PRINT NAME AND SIGNATURE AND DATE	<i>[Signature]</i>	
MANAGER SIGNATURE AND DATE	<i>[Signature]</i>	

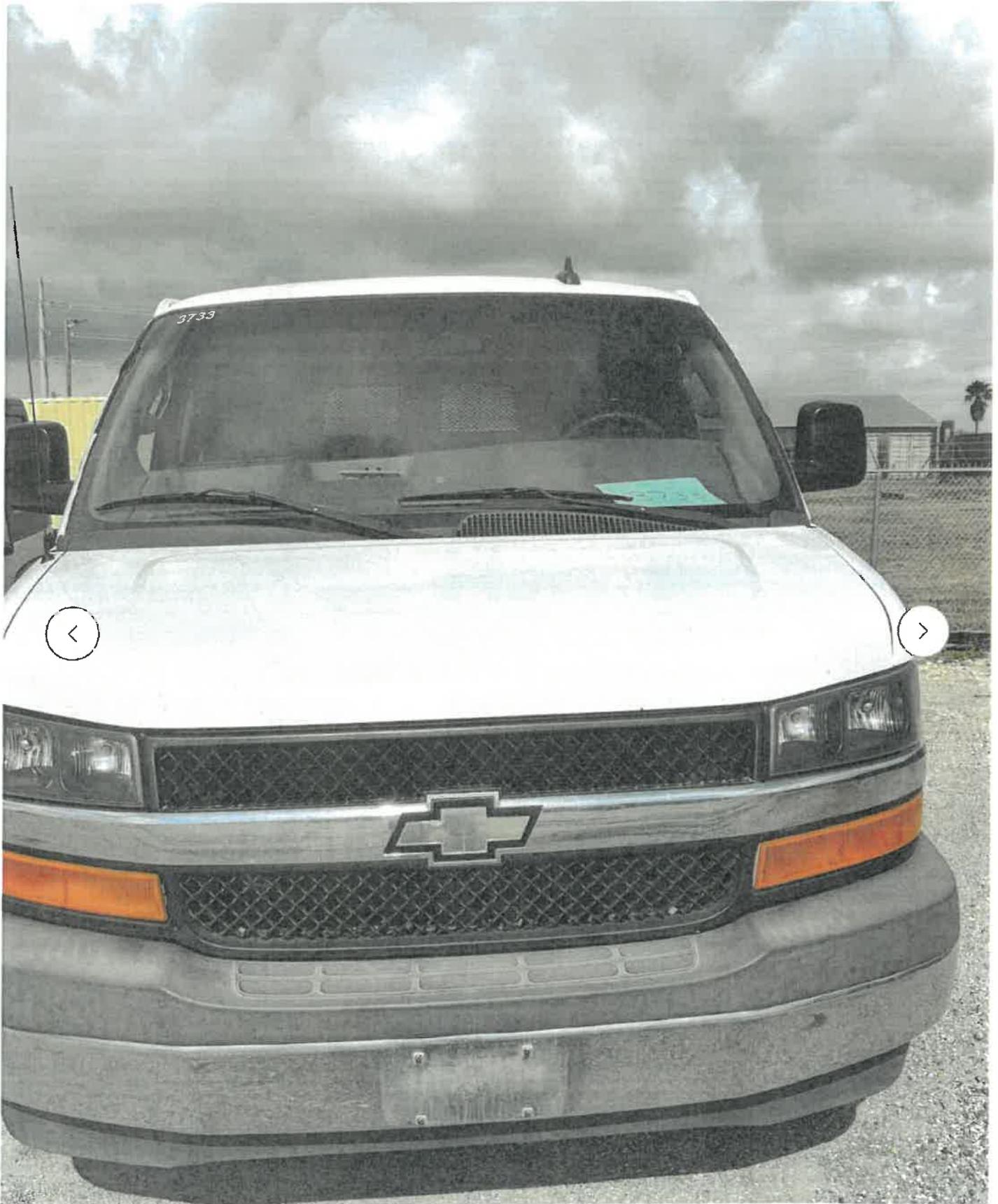
BUICK ENCORE

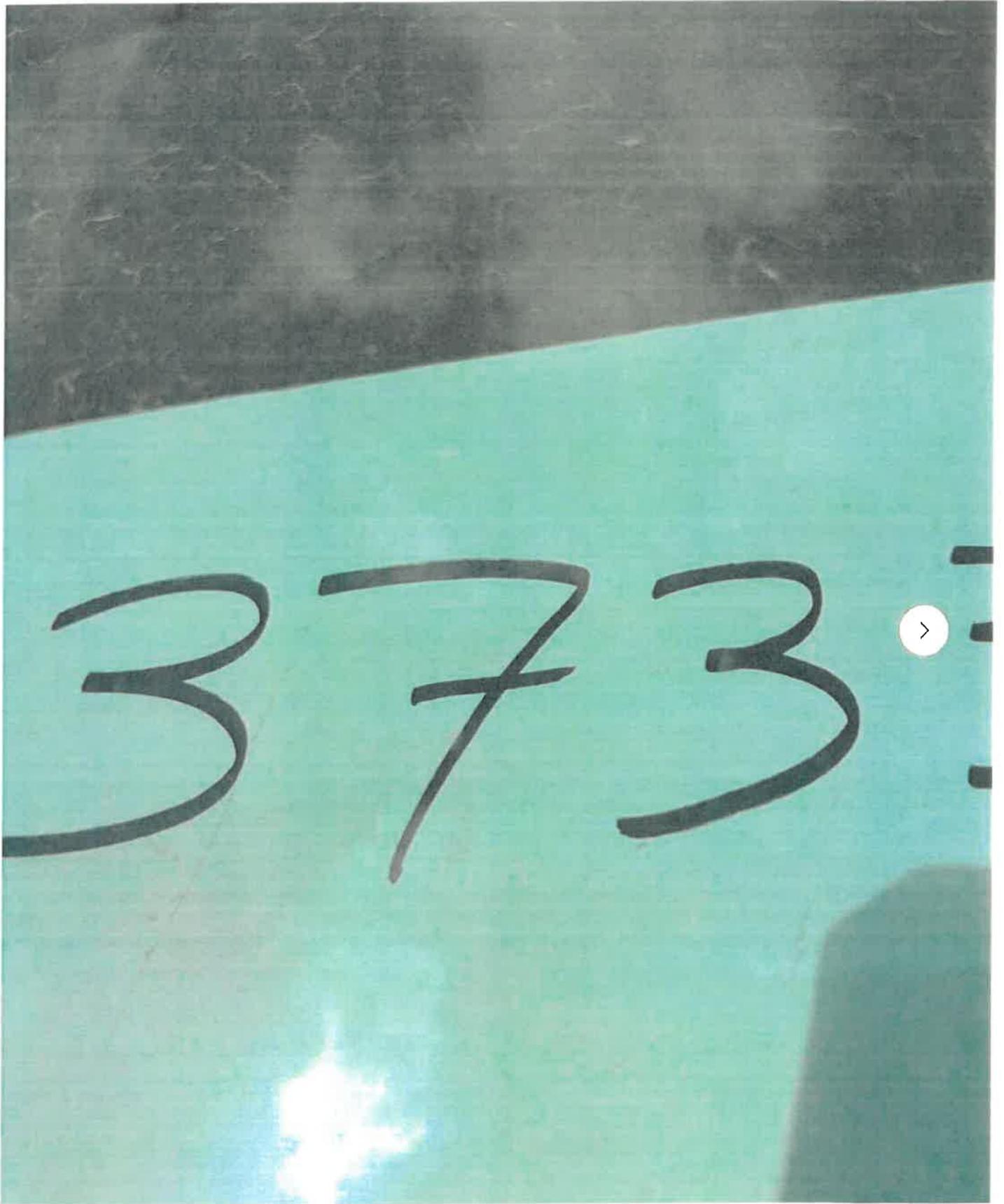






1116 5204







ASSET DISPOSAL REPORT

DATE: 2/25/2026

To: Purchasing Department, Attention: Fixed Asset Property Manager

From: 172111 / FLEET MGMT [Signature]
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
Theft
Destroyed by
Trade-In
Donated

Disposal of: 32325 FORD F150
FAID No.

Reason for disposal: AGE OF ASSET, ASSET HAS BEEN REPLACED

Serial No./VIN #: 1FTEW1CB9JKC88453

From: 172111 FLEET MGMT Location: 2875 NICHOLAS AVE DICKINSON
Department No. & Name Building, Floor, Suite, or Room No.

Comments:

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS

PURCHASING DEPARTMENT USE ONLY

2/27/2026
Date Form Processed

[Signature]
Fixed Asset Property Manager



FLEET PRE-AUCTION DISCLOSURE FORM

DATE: 2/25/2026

To: Purchasing Department, Attention: Fixed Asset Property Manager

From: [Signature] ELIZABETH BRYANT 172111/FLEET MGMT
Signature Print Name Department/Division

Re: Pre-auction vehicle disclosure

Starting Bid:

Disposal of FAID No: 32325 Description: 2018 FORD F150

Unit # C7813 Serial/VIN: 1FTEW1CB9JKC88453 Mileage: 80819

Reason for Disposal: AGE / MILAGE / ASSET HAS BEEN REPLACED

Has this vehicle ever been in a wreck? Yes No If Yes, what year.

What type of damaged resulted from wreck?

List any engine issues:

List any transmission issues:

List any fluid leaks (oil, fuel, radiator, transmission, etc.)

Are all tires road-worthy? Yes No If No, please explain:

Is there a spare tire? Yes No Is the full jack present? Yes No

Other: PLEASE REFERENCE FINAL INSPECTION REPORT

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PURCHASING DEPARTMENT USE ONLY

2/27/2026
Date Form Processed

[Signature]
Fixed Asset Property Manager

8/25/'25 8:54 AM

Vehicle Inspection Form

Inventory ID: C7813	Asset Number: 32325	Fair Market Value:
Short Description: Year 2018 Make FORD Model F150		
VIN: 1 F T E W 1 C B 9 J K C 8 8 4 5 3		Title Restriction: <input type="checkbox"/> Y <input type="checkbox"/> N
Odometer: 8 2 6 6 8	<input type="checkbox"/> Miles <input type="checkbox"/> Kilometers Odometer Accurate <input checked="" type="checkbox"/> Y <input type="checkbox"/> N:	
Long Description:		
This Vehicle: <input checked="" type="checkbox"/> Starts <input type="checkbox"/> Starts with a Boost & <input checked="" type="checkbox"/> Runs/Driveable <input type="checkbox"/> Engine Runs <input type="checkbox"/> Does Not Run <input type="checkbox"/> For Parts Only		
Engine- Type: 3.3L, V6 <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Diesel Engine <input type="checkbox"/> Propane/Natural Gas <input type="checkbox"/> Gas/Electric Hybrid		
Engine Condition: <input checked="" type="checkbox"/> Runs <input type="checkbox"/> Needs repair <input type="checkbox"/> is in unknown condition		
Repairs needed: _____		
This vehicle was maintained every _____ <input type="checkbox"/> Days <input type="checkbox"/> Hours <input type="checkbox"/> Miles		
Date Removed From Service: _____ Maintenance Records: <input type="checkbox"/> Available <input type="checkbox"/> Not Available For Inspection		
Transmission: <input checked="" type="checkbox"/> Automatic <input type="checkbox"/> Manual Speed Condition: <input type="checkbox"/> Operable <input type="checkbox"/> Needs repair <input type="checkbox"/> Is Unknown Condition		
Repairs Needed: _____		
Drivetrain: <input checked="" type="checkbox"/> 2 Wheel Drive <input type="checkbox"/> 4 Wheel Drive Condition: _____		
Exterior: Color: WHITE Windows: <input checked="" type="checkbox"/> No Cracked Glass <input type="checkbox"/> Cracked		
Minor: <input checked="" type="checkbox"/> Dents <input checked="" type="checkbox"/> Scratches <input type="checkbox"/> Dings Tire Condition: FAIR Tread: _____ #Flat Hubcaps # _____		
Major Damage to: _____		
Additional Damage: _____		
Decals: <input type="checkbox"/> None <input type="checkbox"/> Have Been Sprayed <input type="checkbox"/> or <input type="checkbox"/> Have been Removed & <input checked="" type="checkbox"/> Impressions Remain <input type="checkbox"/> No Impressions		
Emergency equip: <input type="checkbox"/> None <input checked="" type="checkbox"/> Has been removed & <input type="checkbox"/> There are holes in the exterior <input checked="" type="checkbox"/> There are no holes		
Interior: Color GRAY <input type="checkbox"/> Cloth <input checked="" type="checkbox"/> Vinyl <input type="checkbox"/> Leather		
Damage to Seats: WORN, TORN & STAINED		
Damage to Dash/Floor: WORN, TORN & STAINED		
Radio: <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Brand & Model: _____ <input type="checkbox"/> AM <input checked="" type="checkbox"/> AM/FM <input type="checkbox"/> AM/FM Cassette <input type="checkbox"/> AM/FM CD		
<input type="checkbox"/> AC (Condition: <input checked="" type="checkbox"/> Cold <input type="checkbox"/> Unknown) <input type="checkbox"/> No AC Air Bags: <input checked="" type="checkbox"/> Driver's Side <input checked="" type="checkbox"/> Dual		
<input type="checkbox"/> Cruise Control <input checked="" type="checkbox"/> Tilt Steering <input checked="" type="checkbox"/> Remote Mirrors <input type="checkbox"/> Climate Control		
Power: <input checked="" type="checkbox"/> Steering <input checked="" type="checkbox"/> Windows <input checked="" type="checkbox"/> Door Locks <input type="checkbox"/> Seats		
Additional Equipment: _____		
Manufacturer _____ Model _____ Serial # _____		
<input type="checkbox"/> Tool Box <input type="checkbox"/> Light Bar <input type="checkbox"/> Ladder Rack <input type="checkbox"/> Utility Body: Brand _____ <input type="checkbox"/> Hitch: Type _____		
Location of Asset: DSY 8/14/2025		
For more information contact: _____		
Reminder: Do not close items on or surrounding a Holiday, on Friday nights, or Weekends. Stagger closing times by 10 minutes.		

2/18/26 8:53 AM



The County of Galveston
Jeff's Auction Checklist

	REMARKS	DATE
UNIT#	7813	1/26/26
LICENSE PLATE NUMBER	138 2884	
DESTROYED LICENSE PLATE AND REGISTRATION STICKER	yes	
TELEMATICS REMOVAL	N/A	
TELEMATICS SERIAL NUMBER	N/A	
DECALS REMOVED	yes	
RADIO REMOVED	N/A	
RADIO SERIAL NUMBER	N/A	
LIGHTS (POLICE) REMOVED	N/A	
FIRE EXTINGUISHER REMOVED	yes	
TOOL BOX REMOVED	N/A	
FUEL CELL REMOVED	N/A	
MECHANIC PRINT NAME AND SIGNATURE AND DATE	Sebastian Maza Sr	1/16/26
MANAGER SIGNATURE AND DATE	[Signature]	1/16/2026



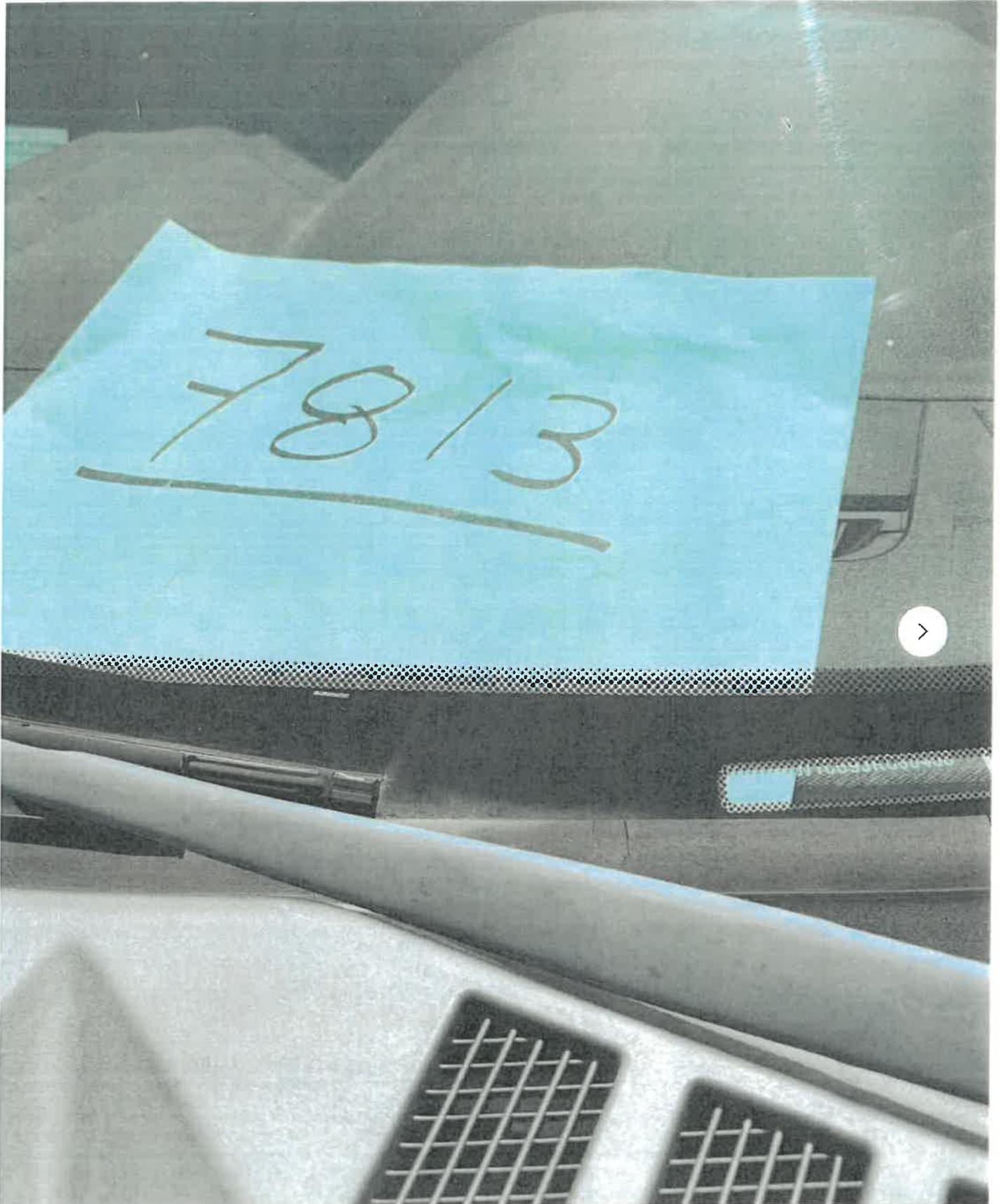
11/10/2024





1/16/2023







ASSET DISPOSAL REPORT

DATE: 2/25/2026

To: Purchasing Department, Attention: Fixed Asset Property Manager

From: 172111 / FLEET MGMT

Department No. & Name, Department Asset Custodian Authorized Signature

[Handwritten signature]

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

METHOD OF DISPOSAL

- Disposal methods: Auction, Theft, Destroyed by (Natural Disaster, Traffic Accident), Trade-In, Donated.

Disposal of: 32365 JEEP WRANGLER

Reason for disposal: AGE OF ASSET, ASSET HAS BEEN REPLACED

Serial No./VIN #: 1C4BJWDG9JL908379

From: 172111 FLEET MGMT Location: 2875 NICHOLAS AVE DICKINSON

Comments:

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS

PURCHASING DEPARTMENT USE ONLY

Date Form Processed: 2/27/2026

[Handwritten signature] Fixed Asset Property Manager



FLEET PRE-AUCTION DISCLOSURE FORM

DATE: 2/25/2026

To: Purchasing Department, Attention: Fixed Asset Property Manager

From: [Signature] ELIZABETH BRYANT 172111/FLEET MGMT
Signature Print Name Department/Division

Re: Pre-auction vehicle disclosure

Starting Bid:

Disposal of FAID No: 32365 Description: 2018 JEEP WRANGLER

Unit # C3804 Serial/VIN: 1C4BJWDG9JL908379 Mileage: 87392

Reason for Disposal: AGE / MILAGE / ASSET HAS BEEN REPLACED

Has this vehicle ever been in a wreck? Yes No If Yes, what year: _____

What type of damaged resulted from wreck? _____

List any engine issues: _____

List any transmission issues: _____

List any fluid leaks (oil, fuel, radiator, transmission, etc.) _____

Are all tires road-worthy? Yes No If No, please explain: _____

Is there a spare tire? Yes No Is the full jack present? Yes No

Other: PLEASE REFERENCE FINAL INSPECTION REPORT

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS

PURCHASING DEPARTMENT USE ONLY

2/27/2026
Date Form Processed

[Signature]
Fixed Asset Property Manager

Form No. FA-06

Vehicle Inspection Form

Inventory ID **C3804**

Asset Number: **32365**

Fair Market Value:

Short Description:
Year **2018**

Make **JEEP**

Model **WRANGLER**

VIN:

1	C	4	B	J	W	D	G	9	J	L	9	0	8	3	7	9
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

 Title Restriction: Y N

Odometer:

8	7	4	4	6
---	---	---	---	---

 Miles Kilometers Odometer Accurate Y N:

Long Description:

This Vehicle: Starts Starts with a Boost & Runs/Driveable Engine Runs Does Not Run For Parts Only

Engine-Type: **3.6L V6** Gas Diesel Engine Propane/Natural Gas Gas/Electric Hybrid

Engine Condition: Runs Needs repair is in unknown condition

Repairs needed: **CHECK ENGINE LIGHT ON**

This vehicle was maintained every _____ Days Hours Miles

Date Removed From Service: _____ Maintenance Records: Available Not Available For Inspection

Transmission: Automatic Manual ___ Speed Condition: Operable Needs repair Is Unknown Condition

Repairs Needed: _____

Drivetrain: 2 Wheel Drive 4 Wheel Drive Condition: _____

Exterior: Color: **WHITE** Windows: No Cracked Glass Cracked BULLSEYE ON WINDSHIELD

Minor: Dents Scratches Dings Tire Condition: **FAIR** Tread: _____ #Flat _____ Hubcaps # _____

Major Damage to: _____

Additional Damage: _____

Decals: None Have Been Sprayed or Have been Removed & Impressions Remain No Impressions

Emergency equip: None Has been removed & There are holes in the exterior There are no holes

Interior: Color **BLACK** Cloth Vinyl Leather

Damage to Seats: **WORN, TORN & STAINED**

Damage to Dash/Floor: **NORMAL WEAR & TEAR; MISSING INTERIOR PANELS**

Radio: Stock or Brand & Model: _____ AM AM/FM AM/FM Cassette AM/FM CD

AC (Condition: Cold Unknown) No AC Air Bags: Driver's Side Dual

Cruise Control Tilt Steering Remote Mirrors Climate Control

Power: Steering Windows Door Locks Seats

Additional Equipment: _____

Manufacturer _____ Model _____ Serial # _____

Tool Box Light Bar Ladder Rack Utility Body: Brand _____ Hitch: Type _____

Location of Asset: **DSY 2/11/2026**

For more information contact: _____

Reminder: Do not close items on or surrounding a Holiday, on Friday nights, or Weekends. Stagger closing times by 10 minutes.

2/18/26 9:28 AM



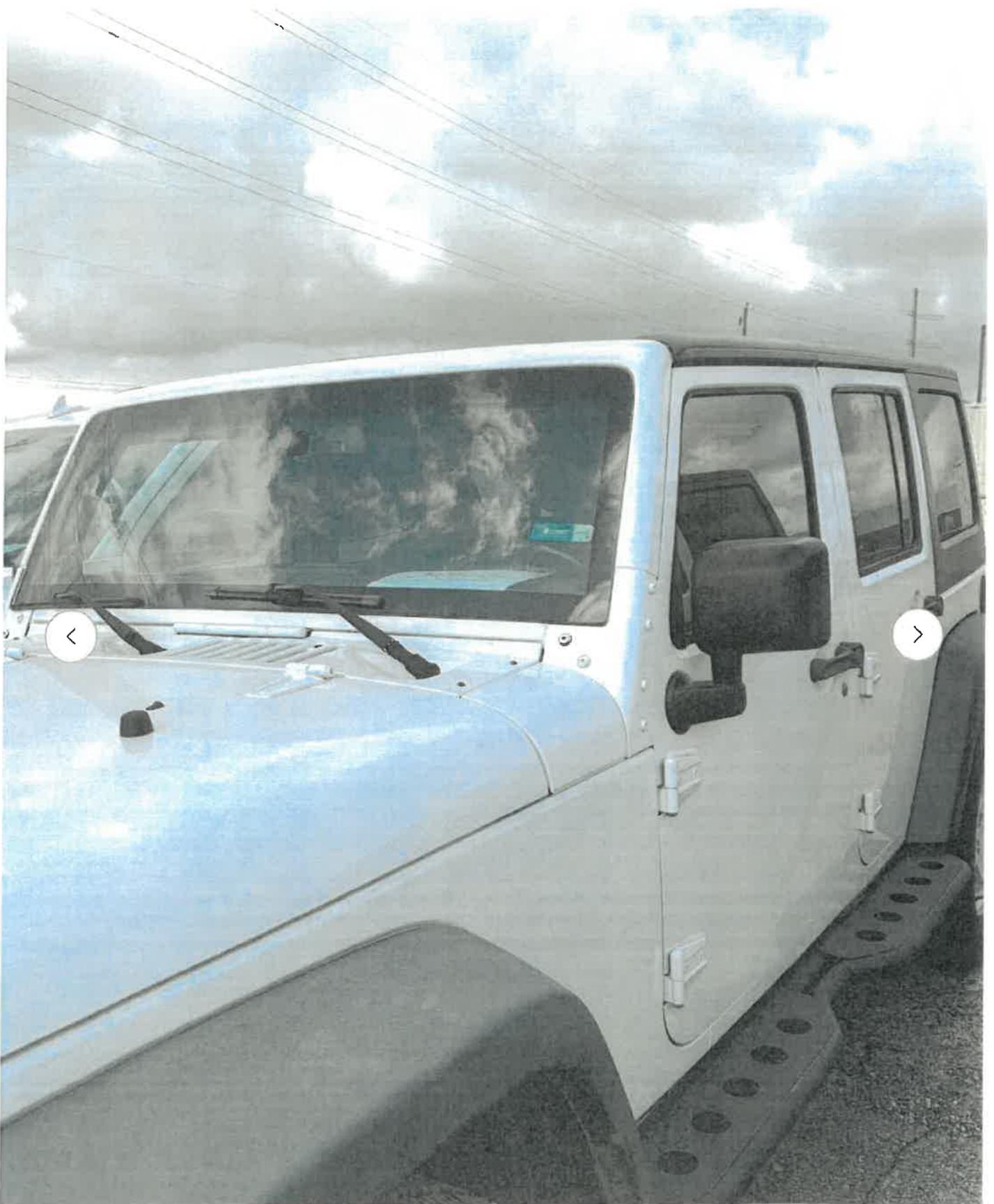
The County of Galveston
Jeff's Auction Checklist

	REMARKS	DATE
UNIT#	3804	1-2-26
LICENSE PLATE NUMBER	KXG 6186	1-2-26
DESTROYED LICENSE PLATE AND REGISTRATION STICKER	yes	1-2-26
TELEMATICS REMOVAL	yes	1-2-26
TELEMATICS SERIAL NUMBER	G8XK-4JW-B6E	1-2-26
DECALS REMOVED	yes	1-2-26
RADIO REMOVED	N/A	1-2-26
RADIO SERIAL NUMBER	N/A	1-2-26
LIGHTS (POLICE) REMOVED	yes	1-2-26
FIRE EXTINGUISHER REMOVED	N/A	1-2-26
TOOL BOX REMOVED	N/A	1-2-26
FUEL CELL REMOVED	N/A	1-2-26
MECHANIC PRINT NAME AND SIGNATURE AND DATE	Kennet Trammell	1-2-26
MANAGER SIGNATURE AND DATE		1-2-2026



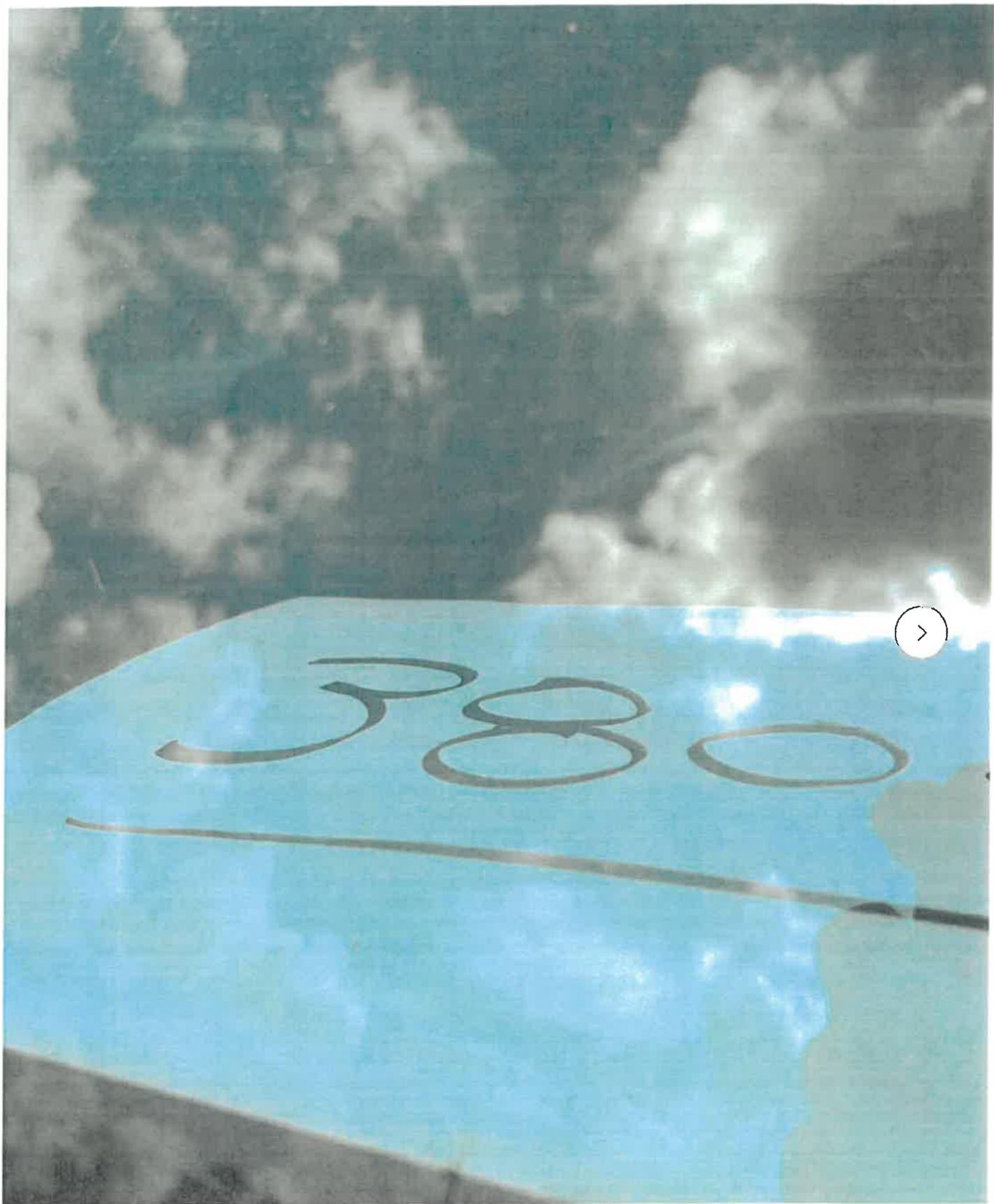
1146 5070





2016 2017





2/25/26 1:31 PM



ASSET DISPOSAL REPORT

DATE: 2/25/2026

To: Purchasing Department, Attention: Fixed Asset Property Manager

From: 172111 / FLEET MGMT

Department No. & Name, Department Asset Custodian Authorize / Signature

[Handwritten signature]

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

METHOD OF DISPOSAL

- Options for disposal method: Auction, Theft, Destroyed by (Natural Disaster, Traffic Accident), Trade-In, Donated.

Disposal of: 32366 JEEP WRANGLER

FAID No.

Reason for disposal: AGE OF ASSET, ASSET HAS BEEN REPLACED

Serial No./VIN #: 1C4BJWDG7JL908607

From: 172111 FLEET MGMT

Department No. & Name

Location: 2875 NICHOLAS AVE DICKINSON

Building, Floor, Suite, or Room No.

Comments:

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2/27/2026
Date Form Processed

[Handwritten signature]
Fixed Asset Property Manager



FLEET PRE-AUCTION DISCLOSURE FORM

DATE: 2/25/2026

To: Purchasing Department, Attention: Fixed Asset Property Manager

From: [Signature] ELIZABETH BRYANT 172111/FLEET MGMT
Signature Print Name Department/Division

Re: Pre-auction vehicle disclosure

Starting Bid:

Disposal of FAID No: 32366 Description: 2018 JEEP WRANGLER

Unit # C3803 Serial/VIN: 1C4BJWDG7JL908607 Mileage: 112083

Reason for Disposal: AGE / MILAGE / ASSET HAS BEEN REPLACED

Has this vehicle ever been in a wreck? Yes No If Yes, what year.

What type of damaged resulted from wreck?

List any engine issues:

List any transmission issues:

List any fluid leaks (oil, fuel, radiator, transmission, etc.)

Are all tires road-worthy? Yes No If No, please explain:

Is there a spare tire? Yes No Is the full jack present? Yes No

Other: PLEASE REFERENCE FINAL INSPECTION REPORT

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS

PURCHASING DEPARTMENT USE ONLY

2/27/2026
Date Form Processed

[Signature]
Fixed Asset Property Manager

Vehicle Inspection Form

Inventory ID: **C3803** Asset Number: **32366** Fair Market Value:

Short Description: Year **2018** Make **JEEP** Model **WRANGLER**

VIN:

1	C	4	B	J	W	D	G	7	J	L	9	0	8	6	0	7
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

 Title Restriction: Y N

Odometer:

1	1	2	1	3	1
---	---	---	---	---	---

 Miles Kilometers Odometer Accurate Y N:

Long Description:

This Vehicle: Starts Starts with a Boost & Runs/Driveable Engine Runs Does Not Run For Parts Only

Engine-Type: **3.6L, V6** Gas Diesel Engine Propane/Natural Gas Gas/Electric Hybrid

Engine Condition: Runs Needs repair is in unknown condition

Repairs needed: **LOW TIRE LIGHT ON**

This vehicle was maintained every Days Hours Miles

Date Removed From Service: Maintenance Records: Available Not Available For Inspection

Transmission: Automatic Manual Speed Condition: Operable Needs repair Is Unknown Condition

Repairs Needed:

Drivetrain: 2 Wheel Drive 4 Wheel Drive Condition:

Exterior: Color: **WHITE** Windows: No Cracked Glass Cracked

Minor: Dents Scratches Dings Tire Condition: **FAIR** Tread: #Flat Hubcaps #

Major Damage to:

Additional Damage:

Decals: None Have Been Sprayed or Have been Removed & Impressions Remain No Impressions

Emergency equip: None Has been removed & There are holes in the exterior There are no holes

Interior: Color **BLACK** Cloth Vinyl Leather

Damage to Seats: **NORMAL WEAR & TEAR**

Damage to Dash/Floor: **NORMAL WEAR & TEAR**

Radio: Stock or Brand & Model: AM AM/FM AM/FM Cassette AM/FM CD

AC (Condition: Cold Unknown) No AC Air Bags: Driver's Side Dual

Cruise Control Tilt Steering Remote Mirrors Climate Control

Power: Steering Windows Door Locks Seats

Additional Equipment:

Manufacturer Model Serial #

Tool Box Light Bar Ladder Rack Utility Body: Brand Hitch: Type

Location of Asset: **DSY 2/11/2026**

For more information contact:

Reminder: Do not close items on or surrounding a Holiday, on Friday nights, or Weekends. Stagger closing times by 10 minutes.



ASSET TRANSFER REQUEST

Date: 11/25/2025

To: Purchasing Department, Fixed Asset Property Manager

Transferor: [Signature] Chris Horn Department / Division: SHERIFF

Receiver: Bryant, Elizabeth Digitally signed by Bryant, Elizabeth Date: 2025.11.25 10:51:16 -0800 ELIZABETH BRYANT Department / Division: 172111/FLEET MGMT

RE: Please amend the inventory to reflect the following change(s) due to TRANSFER

Transfer 32366 Unit # C3803 Description 2018 JEEP WRANGLER Serial/MIN 908607
From SHERIFF Location
To 172111/FLEET MGMT Location 2875 NICHOLS AVE., DKN 77539
Reason for Transfer SURPLUS

Transfer Unit # Description Serial/MIN
From Location
To Location
Reason for Transfer

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS

PURCHASING DEPARTMENT USE ONLY

2/27/2026 Date Form Processed

[Signature] Fixed Asset Property Manager

nr/Fixed Assets/FA Forms/FA-02, Transfer revised 10/05/2020

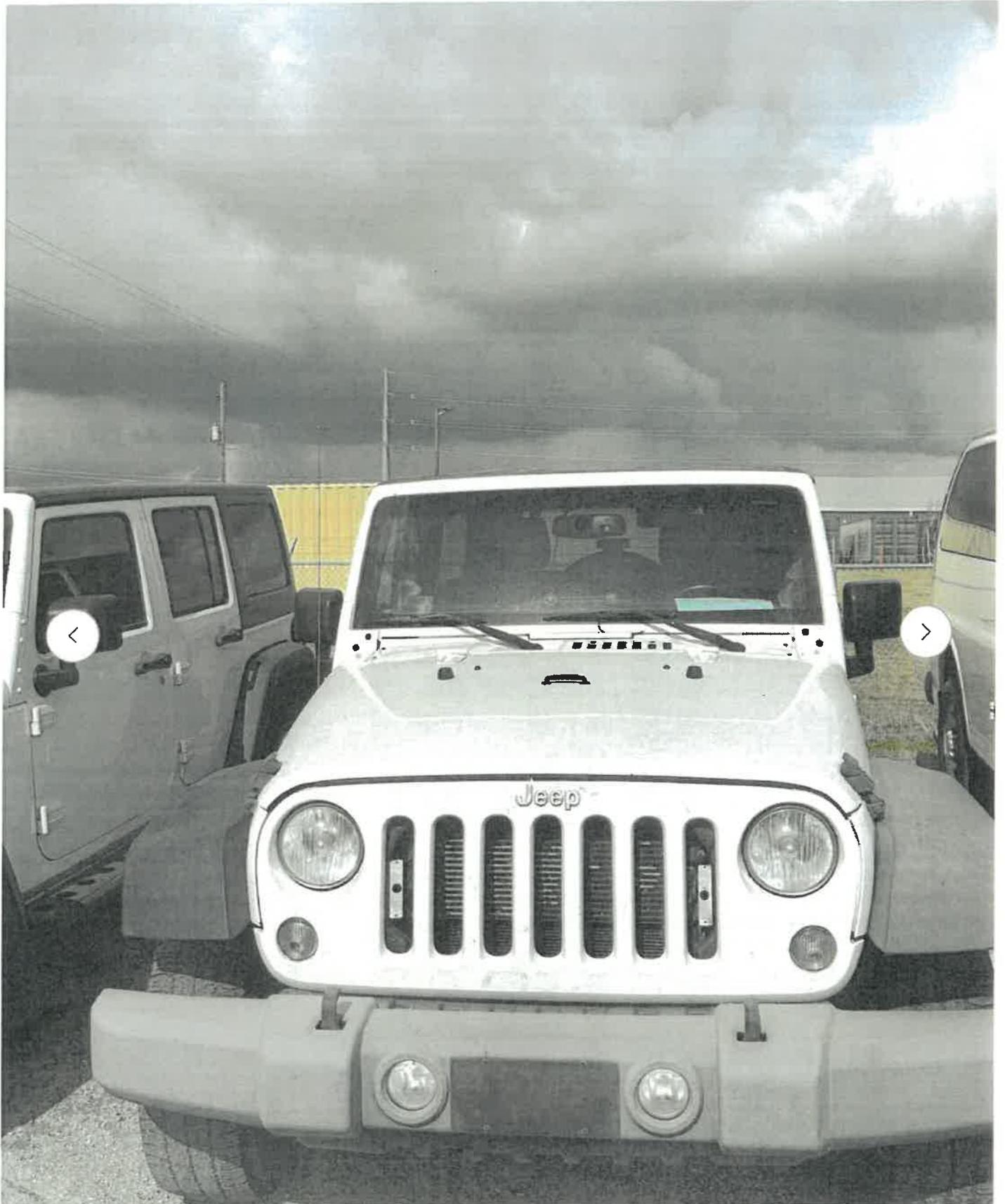
2014 5204

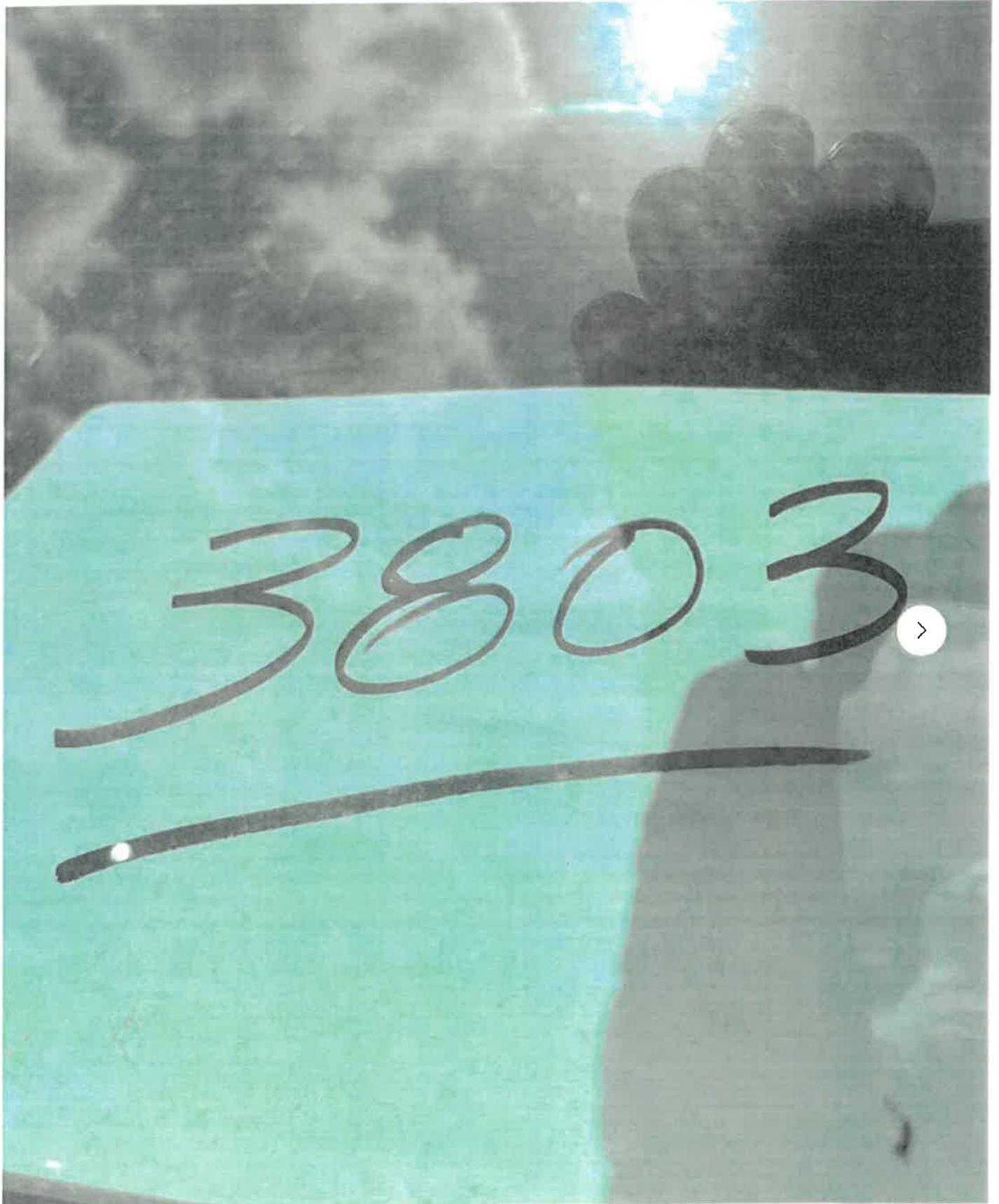






11/16/2021







ASSET DISPOSAL REPORT

DATE: 2/25/2026

To: Purchasing Department, Attention: Fixed Asset Property Manager

From: 172111 / FLEET MGMT

Department No. & Name, Department Asset Custodian Authorized Signature

[Handwritten Signature]

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

METHOD OF DISPOSAL

- Checkboxes for Auction, Theft, Destroyed by (Natural Disaster, Traffic Accident), Trade-In, and Donated.

Disposal of: 32770 CHEVORLET TAHOE FAID No.

Reason for disposal: AGE OF ASSET, ASSET HAS BEEN REPLACED

Serial No./VIN #: 1GNLCDEC7LR243990

From: 172111 FLEET MGMT Location: 2875 NICHOLAS AVE DICKINSON

Comments:

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS

PURCHASING DEPARTMENT USE ONLY

Date Form Processed: 2/27/2026

[Handwritten Signature] Fixed Asset Property Manager



FLEET PRE-AUCTION DISCLOSURE FORM

DATE: 2/26/2026

To: Purchasing Department, Attention: Fixed Asset Property Manager

From: [Signature] ELIZABETH BRYANT 172111/FLEET MGMT
Signature Print Name Department/Division

Re: Pre-auction vehicle disclosure

Starting Bid:

Disposal of FAID No: 32770 Description: 2020 CHEVORLET TAHOE

Unit # C3008 Serial/VIN: 1GNLCDEC7LR243990 Mileage: 94043

Reason for Disposal: AGE / MILAGE / ASSET HAS BEEN REPLACED

Has this vehicle ever been in a wreck? Yes No If Yes, what year.

What type of damaged resulted from wreck?

List any engine issues:

List any transmission issues:

List any fluid leaks (oil, fuel, radiator, transmission, etc.)

Are all tires road-worthy? Yes No If No, please explain:

Is there a spare tire? Yes No Is the full jack present? Yes No

Other: PLEASE REFERENCE FINAL INSPECTION REPORT

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS

PURCHASING DEPARTMENT USE ONLY

2/27/2026
Date Form Processed

[Signature]
Fixed Asset Property Manager

1/27/26 2:43 PM

Vehicle Inspection Form

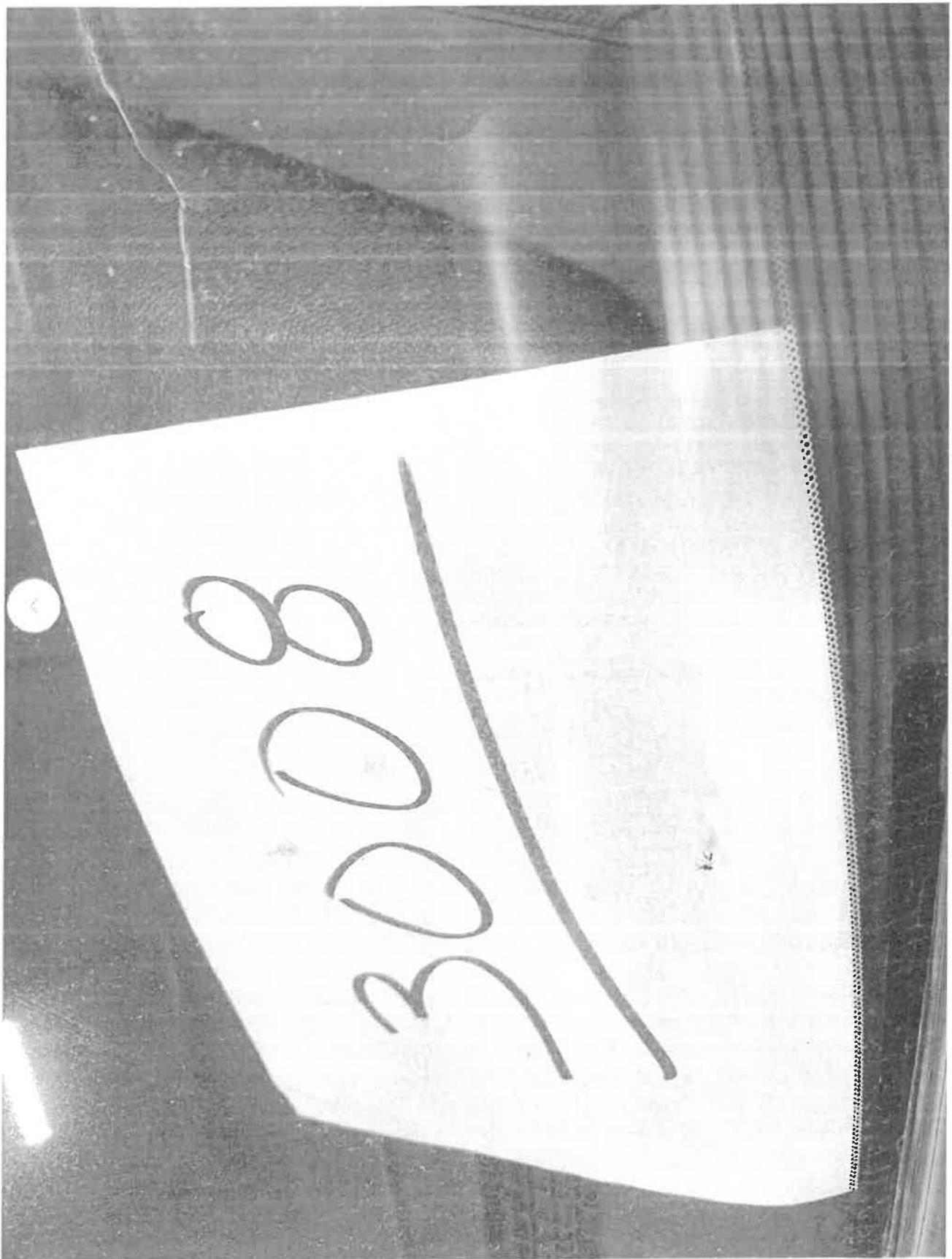
Inventory ID: C3008	Asset Number: 32770	Fair Market Value:																	
Short Description: Year 2018	Make CHEVROLET	Model TAHOE MPV																	
VIN: <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>1</td><td>G</td><td>N</td><td>L</td><td>C</td><td>D</td><td>E</td><td>C</td><td>7</td><td>L</td><td>R</td><td>2</td><td>4</td><td>3</td><td>9</td><td>9</td><td>0</td></tr></table>		1	G	N	L	C	D	E	C	7	L	R	2	4	3	9	9	0	Title Restriction: <input type="checkbox"/> Y <input type="checkbox"/> N
1	G	N	L	C	D	E	C	7	L	R	2	4	3	9	9	0			
Odometer: <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>9</td><td>6</td><td>2</td><td>2</td><td>1</td><td> </td></tr></table>		9	6	2	2	1		<input checked="" type="checkbox"/> Miles <input type="checkbox"/> Kilometers Odometer Accurate <input type="checkbox"/> Y <input type="checkbox"/> N: _____											
9	6	2	2	1															
Long Description:																			
This Vehicle: <input type="checkbox"/> Starts <input type="checkbox"/> Starts with a Boost & <input checked="" type="checkbox"/> Runs/Driveable <input type="checkbox"/> Engine Runs <input type="checkbox"/> Does Not Run <input type="checkbox"/> For Parts Only																			
Engine- Type: 5.3L, V8 <input type="checkbox"/> Gas <input type="checkbox"/> Diesel Engine <input type="checkbox"/> Propane/Natural Gas <input type="checkbox"/> Gas/Electric Hybrid																			
Engine Condition: <input checked="" type="checkbox"/> Runs <input type="checkbox"/> Needs repair <input type="checkbox"/> is in unknown condition																			
Repairs needed: _____																			
This vehicle was maintained every _____ <input type="checkbox"/> Days <input type="checkbox"/> Hours <input type="checkbox"/> Miles																			
Date Removed From Service: _____ Maintenance Records: <input type="checkbox"/> Available <input type="checkbox"/> Not Available For Inspection																			
Transmission: <input checked="" type="checkbox"/> Automatic <input type="checkbox"/> Manual ___ Speed Condition: <input type="checkbox"/> Operable <input type="checkbox"/> Needs repair <input type="checkbox"/> Is Unknown Condition																			
Repairs Needed: _____																			
Drivetrain: <input checked="" type="checkbox"/> 2 Wheel Drive <input type="checkbox"/> 4 Wheel Drive Condition: _____																			
Exterior: Color: WHITE Windows: <input type="checkbox"/> No Cracked Glass <input checked="" type="checkbox"/> Cracked <small>BULLSEYE ON WINDSHIELD</small>																			
Minor: <input checked="" type="checkbox"/> Dents <input checked="" type="checkbox"/> Scratches <input checked="" type="checkbox"/> Dings Tire Condition: POOR Tread: _____ #Flat _____ Hubcaps # _____																			
Major Damage to: PUSH BAR BRACKETS STILL ATTACHED																			
Additional Damage: SPOTLIGHT REMOVED																			
Decals: <input type="checkbox"/> None <input type="checkbox"/> Have Been Sprayed or <input checked="" type="checkbox"/> Have been Removed & <input checked="" type="checkbox"/> Impressions Remain <input type="checkbox"/> No Impressions																			
Emergency equip: <input type="checkbox"/> None <input checked="" type="checkbox"/> Has been removed & <input checked="" type="checkbox"/> There are holes in the exterior <input type="checkbox"/> There are no holes																			
Interior: Color BLACK <input checked="" type="checkbox"/> Cloth <input checked="" type="checkbox"/> Vinyl <input type="checkbox"/> Leather																			
Damage to Seats: WORN & STAINED; CAGE BRACKETS STILL ATTACHED																			
Damage to Dash/Floor: WORN & STAINED; HOLES IN DASH; HEADLINER STAINED																			
Radio: <input checked="" type="checkbox"/> Stock or <input type="checkbox"/> Brand & Model: _____ <input type="checkbox"/> AM <input type="checkbox"/> AM/FM <input type="checkbox"/> AM/FM Cassette <input checked="" type="checkbox"/> AM/FM CD																			
<input checked="" type="checkbox"/> AC (Condition: <input checked="" type="checkbox"/> Cold <input type="checkbox"/> Unknown) <input type="checkbox"/> No AC Air Bags: <input type="checkbox"/> Driver's Side <input checked="" type="checkbox"/> Dual																			
<input checked="" type="checkbox"/> Cruise Control <input type="checkbox"/> Tilt Steering <input checked="" type="checkbox"/> Remote Mirrors <input checked="" type="checkbox"/> Climate Control																			
Power: <input checked="" type="checkbox"/> Steering <input checked="" type="checkbox"/> Windows <input checked="" type="checkbox"/> Door Locks <input checked="" type="checkbox"/> Seats																			
Additional Equipment:																			
Manufacturer _____ Model _____ Serial # _____																			
<input type="checkbox"/> Tool Box <input type="checkbox"/> Light Bar <input type="checkbox"/> Ladder Rack <input type="checkbox"/> Utility Body: Brand _____ <input type="checkbox"/> Hitch: Type _____																			
Location of Asset: DSY 1-13-2026																			
For more information contact: _____																			
Reminder: Do not close items on or surrounding a Holiday, on Friday nights, or Weekends. Stagger closing times by 10 minutes.																			

2/18/26 8:47 AM



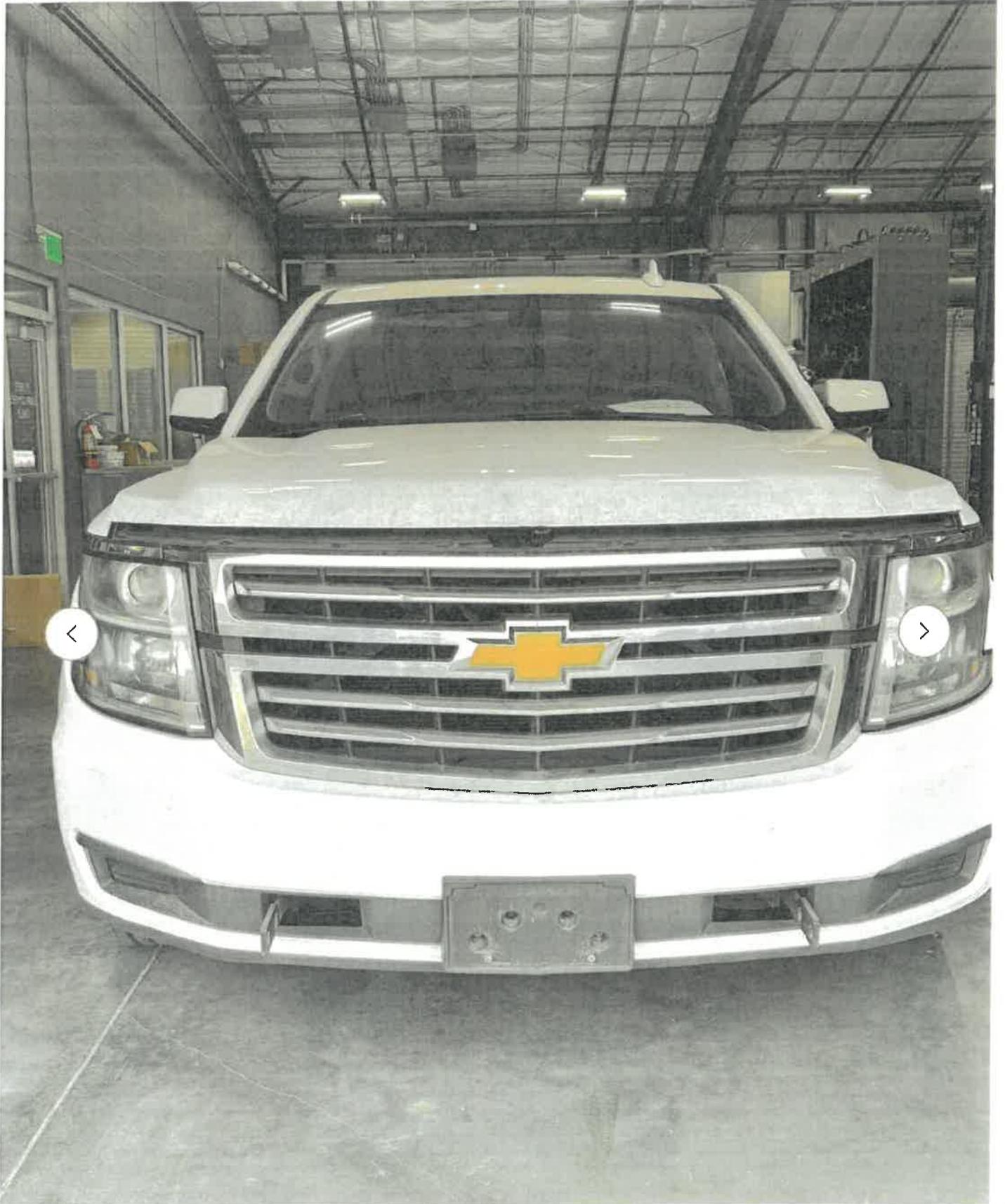
The County of Galveston
Jeff's Auction Checklist

	REMARKS	DATE
UNIT#	3008	1/13/2026
LICENSE PLATE NUMBER	142-2286	
DESTROYED LICENSE PLATE AND REGISTRATION STICKER	yes	
TELEMATICS REMOVAL	n/a	
TELEMATICS SERIAL NUMBER	n/a	
DECALS REMOVED	yes	
RADIO REMOVED	yes	
RADIO SERIAL NUMBER	n/a	
LIGHTS (POLICE) REMOVED	yes	
FIRE EXTINGUISHER REMOVED	yes	
TOOL BOX REMOVED	n/a	
FUEL CELL REMOVED	n/a	1/13/2026
MECHANIC PRINT NAME AND SIGNATURE AND DATE	Julian mesa jr	1/13/2026
MANAGER SIGNATURE AND DATE		1/13/2026



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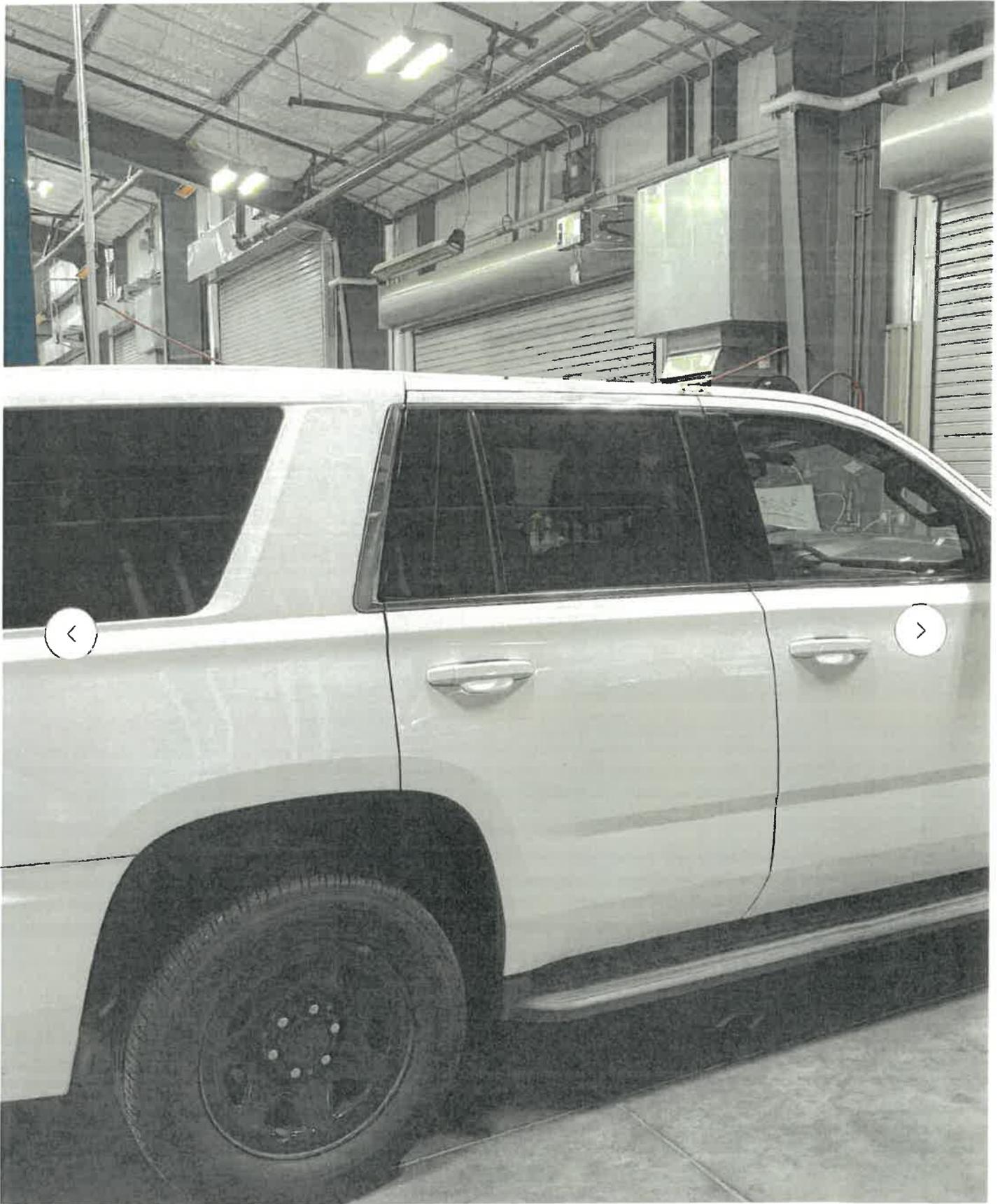
1146 5300

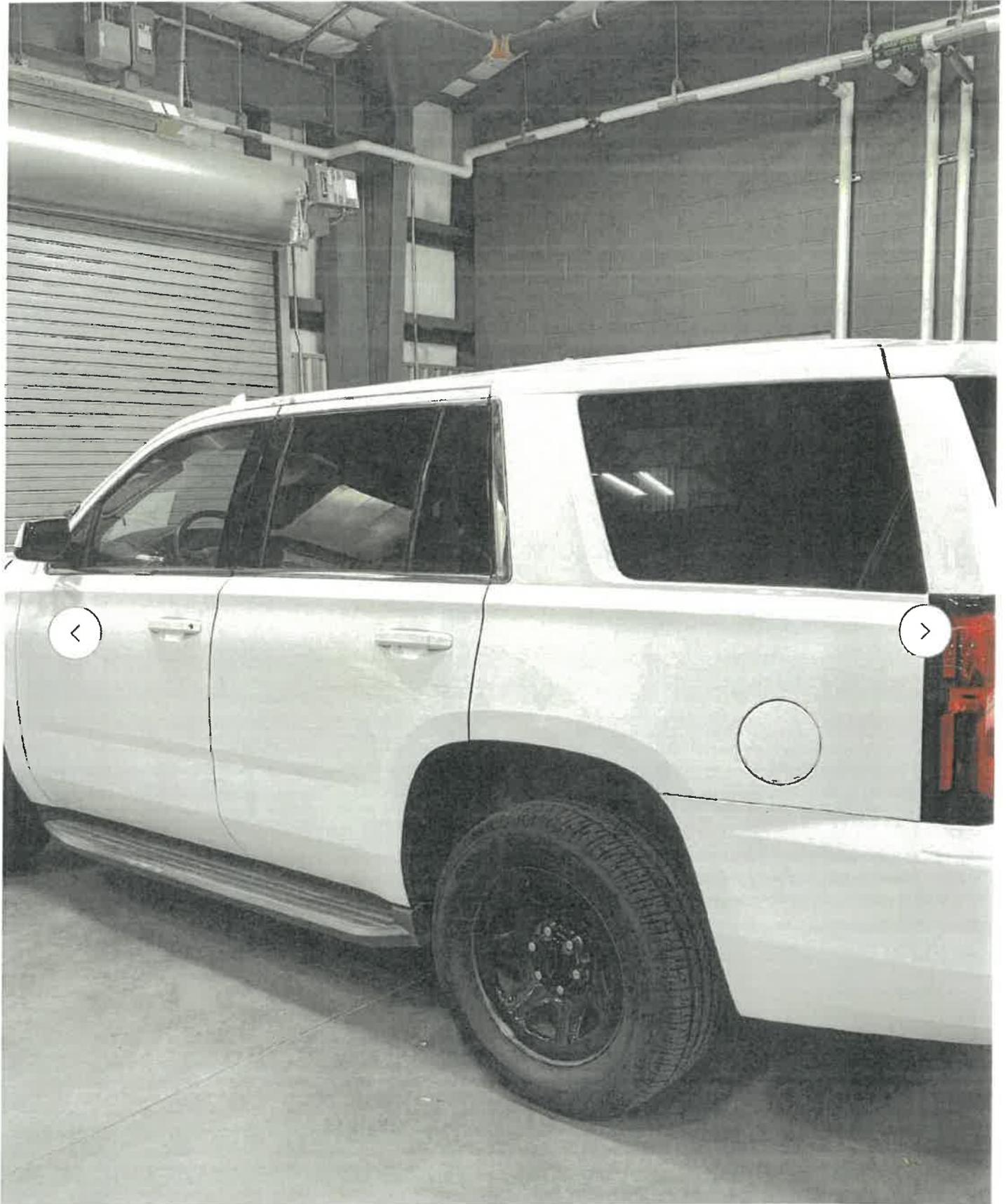


... 1142 5311 ...



1416 5212





2/25/26 2:18 PM



ASSET DISPOSAL REPORT

DATE: 2/25/2026

To: Purchasing Department, Attention: Fixed Asset Property Manager

From: 172111 / FLEET MGMT

Department No. & Name, Department Asset Custodian Authorized Signature

[Handwritten Signature]

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

METHOD OF DISPOSAL

- Auction
Theft
Destroyed by
Trade-In
Donated

Disposal of: 32821 FORD EXPEDITION

FAID No.

Reason for disposal: AGE OF ASSET, ASSET HAS BEEN REPLACED

Serial No./VIN #: 1FMJU1GT8LEA40389

From: 172111 FLEET MGMT

Location: 2875 NICHOLAS AVE DICKINSON

Comments:

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS

PURCHASING DEPARTMENT USE ONLY

Date Form Processed: 2/27/2026

[Handwritten Signature]
Fixed Asset Property Manager



FLEET PRE-AUCTION DISCLOSURE FORM

DATE: 2/25/2026

To: Purchasing Department, Attention: Fixed Asset Property Manager

From: [Signature] ELIZABETH BRYANT 172111/FLEET MGMT
Signature Print Name Department/Division

Re: Pre-auction vehicle disclosure

Starting Bid:

Disposal of FAID No: 32821 Description: 2020 FORD EXPEDITION

Unit # C3015 Serial/VIN: 1FMJU1GT8LEA40389 Mileage: 95630

Reason for Disposal: AGE / MILAGE / ASSET HAS BEEN REPLACED

Has this vehicle ever been in a wreck? Yes No If Yes, what year. _____

What type of damaged resulted from wreck? _____

List any engine issues: _____

List any transmission issues: _____

List any fluid leaks (oil, fuel, radiator, transmission, etc.) _____

Are all tires road-worthy? Yes No If No, please explain: _____

Is there a spare tire? Yes No Is the full jack present? Yes No

Other: PLEASE REFERENCE FINAL INSPECTION REPORT

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS

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2/27/2026
Date Form Processed

[Signature]
Fixed Asset Property Manager



ASSET TRANSFER REQUEST

Date: 11/17/2025

To: Purchasing Department, Fixed Asset Property Manager

Transferor: [Signature] Chris Hale Department / Division: SHERIFF

Receiver: [Signature] ELIZABETH BRYANT Department / Division: 172111/FLEET MGMT

RE: Please amend the inventory to reflect the following change(s) due to TRANSFER

Transfer 32821 Unit # C3015 Description 2020 PRO EXPEDITION Serial/VIN 40389

From SHERIFF Location (Building, Floor, Suite or Room No)

To 172111/FLEET MGMT Location 2875 NICHOLAS AVE, DKN 77539

Reason for Transfer AGE / MILAGE OF ASSET

Transfer Unit # Description Serial/VIN

From Location

To Location

Reason for Transfer

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS

PURCHASING DEPARTMENT USE ONLY

2/27/2026 Date Form Processed

[Signature] Edward J. ... Fixed Asset Property Manager

W/Fixed Assets/FA Forms/FA-02, Transfer revised 10/05/2020

2/19/26 1:34 PM

Vehicle Inspection Form

Inventory ID: C3015

Asset Number: 32821

Fair Market Value:

Short Description:
Year 2020

Make FORD

Model EXPEDITION

VIN: 1 F M J U 1 G T 8 L E A 4 0 3 8 9 Title Restriction: Y N

Odometer: 1 2 7 2 8 0 Miles Kilometers Odometer Accurate Y N:

Long Description:

This Vehicle: Starts Starts with a Boost & Runs/Driveable Engine Runs Does Not Run For Parts Only

Engine- Type: 3.5L, V6 Gas Diesel Engine Propane/Natural Gas Gas/Electric Hybrid

Engine Condition: Runs Needs repair is in unknown condition

Repairs needed: ENGINE RATTLES; LOW VOLTAGE LIGHT ON; CHECK ENGINE LIGHT ON; ORANGE WRENCH LIGHT ON

This vehicle was maintained every _____ Days Hours Miles

Date Removed From Service: _____ Maintenance Records: Available Not Available For Inspection

Transmission: Automatic Manual _____ Speed Condition: Operable Needs repair Is Unknown Condition

Repairs Needed: _____

Drivetrain: 2 Wheel Drive 4 Wheel Drive Condition: _____

Exterior: Color: WHITE Windows: No Cracked Glass Cracked BULLSEYE ON WINDSHIELD

Minor: Dents Scratches Dings Tire Condition: FAIR Tread: _____ #Flat _____ Hubcaps # _____

Major Damage to: PUSH BAR BRACKETS STILL ATTACHED

Additional Damage: _____

Decals: None Have Been Sprayed or Have been Removed & Impressions Remain No Impressions

Emergency equip: None Has been removed & There are holes in the exterior There are no holes

Interior: Color BLACK Cloth Vinyl Leather

Damage to Seats: NORMAL WEAR & TEAR; MISSING INTERIOR PANELS; NO SUNVISOR ON PASSENGER SIDE

Damage to Dash/Floor: NO CENTER CONSOLE; NORMAL WEAR & TEAR

Radio: Stock or Brand & Model: _____ AM AM/FM AM/FM Cassette AM/FM CD

AC (Condition: Cold Unknown) No AC

Air Bags: Driver's Side Dual

Cruise Control Tilt Steering Remote Mirrors Climate Control

Power: Steering Windows Door Locks Seats

Additional Equipment: SPOTLIGHT STILL ATTACHED

Manufacturer _____ Model _____ Serial # _____

Tool Box Light Bar Ladder Rack Utility Body: Brand _____ Hitch: Type _____

Location of Asset: DSY 2/11/2026

For more information contact: _____

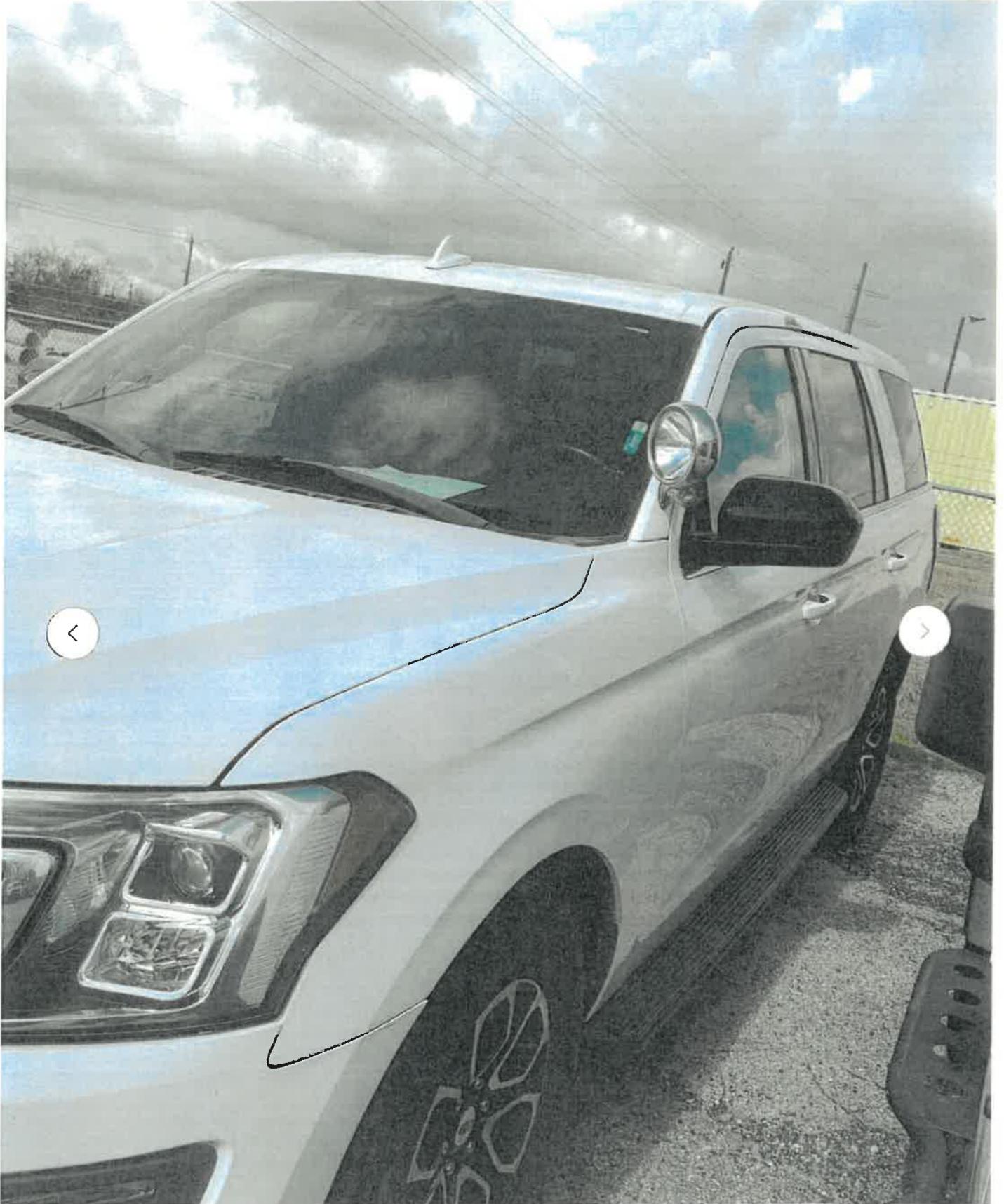
Reminder: Do not close items on or surrounding a Holiday, on Friday nights, or Weekends. Stagger closing times by 10 minutes.

1146 50741

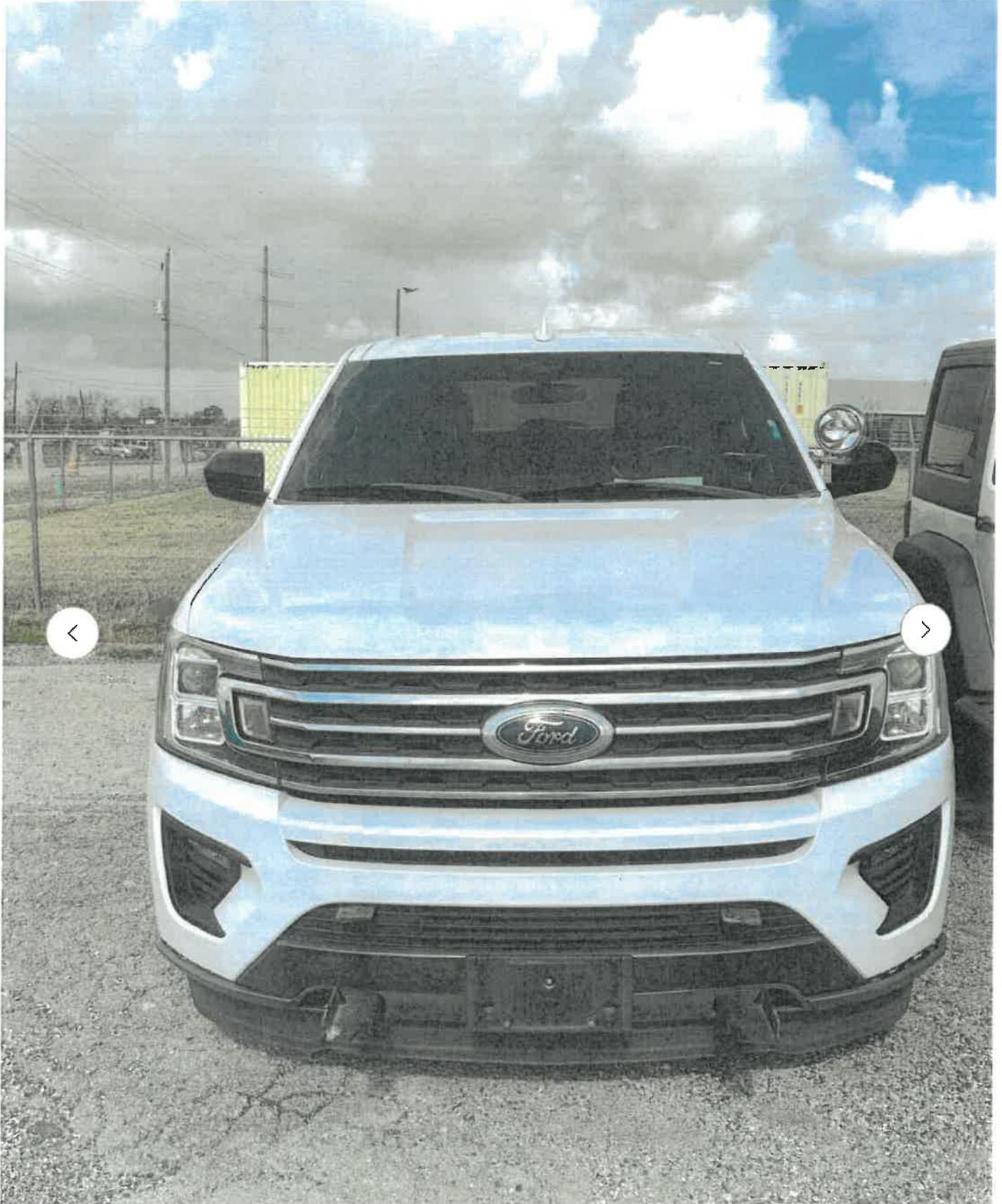


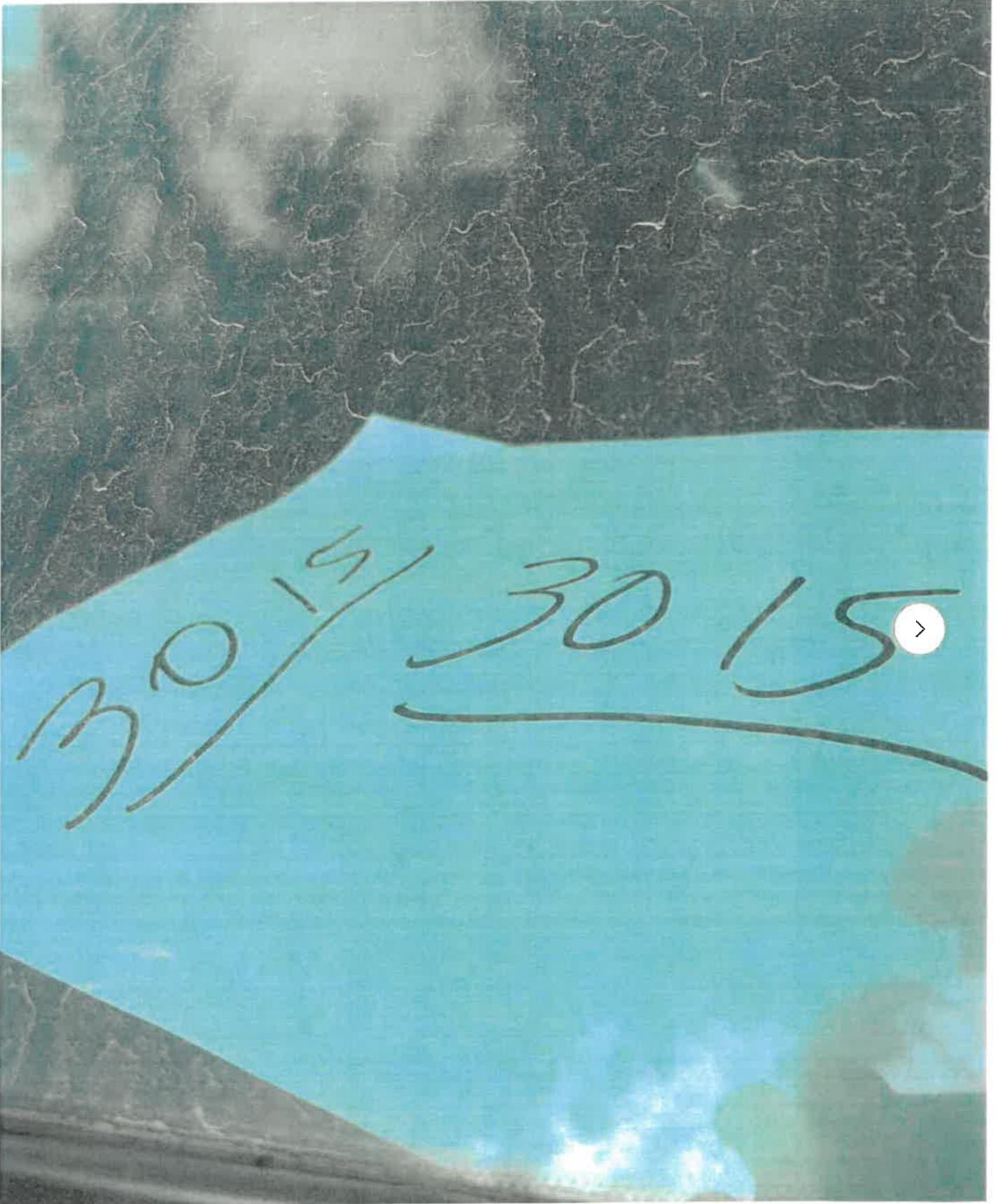


· 11/16 5:27:21



1146 5074







ASSET DISPOSAL REPORT

DATE: 3/2/2026

To: Purchasing Department, Attention: Fixed Asset Property Manager

From: 172111 / FLEET MGMT

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
Theft
Destroyed by
Trade-In
Donated

Disposal of: 30816 FORD F350

Reason for disposal: AGE OF ASSET, ASSET HAS BEEN REPLACED

Serial No./VIN #: 1FT8W3BT5BEB90684

From: 172111 FLEET MGMT

Location: 2875 NICHOLAS AVE DICKINSON

Comments:

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS

PURCHASING DEPARTMENT USE ONLY

Date Form Processed: 3/5/2026

Signature of Fixed Asset Property Manager



FLEET PRE-AUCTION DISCLOSURE FORM

DATE: 3/2/2026

To: Purchasing Department, Attention: Fixed Asset Property Manager

From: *Elizabeth Bryant* ELIZABETH BRYANT 172111/FLEET MGMT
Signature Print Name Department/Division

Re: Pre-auction vehicle disclosure

Starting Bid:

Disposal of FAID No: 30816 Description: 2011 FORD F350

Unit # C7101 Serial/VIN: 1FT8W3BT5BEB90684 Mileage: 136565

Reason for Disposal: AGE / MILAGE / ASSET HAS BEEN REPLACED

Has this vehicle ever been in a wreck? Yes No If Yes, what year. _____

What type of damaged resulted from wreck? _____

List any engine issues: _____

List any transmission issues: _____

List any fluid leaks (oil, fuel, radiator, transmission, etc.) _____

Are all tires road-worthy? Yes No If No, please explain: _____

Is there a spare tire? Yes No Is the full jack present? Yes No

Other: PLEASE REFERENCE FINAL INSPECTION REPORT

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS

PURCHASING DEPARTMENT USE ONLY

3/5/2026
Date Form Processed

Edward J. ...
Fixed Asset Property Manager

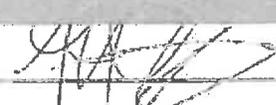
Vehicle Inspection Form

Inventory ID: <u>7101</u>	Asset Number:	Fair Market Value:																	
Short Description: Year <u>2011</u> Make <u>Ford</u> Model <u>F350</u>																			
VIN: <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr><td>1</td><td>F</td><td>T</td><td>B</td><td>W</td><td>3</td><td>B</td><td>T</td><td>5</td><td>B</td><td>E</td><td>B</td><td>9</td><td>0</td><td>6</td><td>8</td><td>4</td></tr> </table> Title Restriction: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N			1	F	T	B	W	3	B	T	5	B	E	B	9	0	6	8	4
1	F	T	B	W	3	B	T	5	B	E	B	9	0	6	8	4			
Odometer: <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr><td>1</td><td>3</td><td>6</td><td>5</td><td>6</td><td>4</td></tr> </table> <input checked="" type="checkbox"/> Miles <input type="checkbox"/> Kilometers Odometer Accurate <input checked="" type="checkbox"/> Y <input type="checkbox"/> N: _____			1	3	6	5	6	4											
1	3	6	5	6	4														
Long Description: This Vehicle: <input type="checkbox"/> Starts <input type="checkbox"/> Starts with a Boost & <input type="checkbox"/> Runs/Driveable <input type="checkbox"/> Engine Runs <input type="checkbox"/> Does Not Run <input type="checkbox"/> For Parts Only Engine- Type: <u>L, V E</u> <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Diesel Engine <input type="checkbox"/> Propane/Natural Gas <input type="checkbox"/> Gas/Electric Hybrid Engine Condition: <input type="checkbox"/> Runs <input type="checkbox"/> Needs repair <input checked="" type="checkbox"/> is in unknown condition Repairs needed: <u>batteries are bad</u> This vehicle was maintained every _____ <input type="checkbox"/> Days <input type="checkbox"/> Hours <input type="checkbox"/> Miles Date Removed From Service: _____ Maintenance Records: <input type="checkbox"/> Available <input type="checkbox"/> Not Available For Inspection Transmission: <input checked="" type="checkbox"/> Automatic <input type="checkbox"/> Manual _____ Speed Condition: <input type="checkbox"/> Operable <input type="checkbox"/> Needs repair <input checked="" type="checkbox"/> Is Unknown Condition Repairs Needed: _____ Drivetrain: <input type="checkbox"/> 2 Wheel Drive <input checked="" type="checkbox"/> 4 Wheel Drive Condition: <u>unknown</u>																			
Exterior: Color: <u>white</u> Windows: <input checked="" type="checkbox"/> No Cracked Glass <input type="checkbox"/> Cracked Minor: <input checked="" type="checkbox"/> Dents <input checked="" type="checkbox"/> Scratches <input checked="" type="checkbox"/> Dings Tire Condition: <u>Fair</u> Tread: _____ #Flat _____ Hubcaps # _____ Major Damage to: <u>front driver fender</u> Additional Damage: _____ Decals: <input type="checkbox"/> None <input type="checkbox"/> Have Been Sprayed or <input checked="" type="checkbox"/> Have been Removed & <input checked="" type="checkbox"/> Impressions Remain <input type="checkbox"/> No Impressions Emergency equip: <input type="checkbox"/> None <input type="checkbox"/> Has been removed & <input type="checkbox"/> There are holes in the exterior <input type="checkbox"/> There are no holes																			
Interior: Color <u>grey</u> <input type="checkbox"/> Cloth <input checked="" type="checkbox"/> Vinyl <input type="checkbox"/> Leather Damage to Seats: _____ Damage to Dash/Floor: _____ Radio: <input checked="" type="checkbox"/> Stock or <input type="checkbox"/> Brand & Model: _____ <input type="checkbox"/> AM <input checked="" type="checkbox"/> AM/FM <input type="checkbox"/> AM/FM Cassette <input type="checkbox"/> AM/FM CD <input checked="" type="checkbox"/> AC (Condition: <input type="checkbox"/> Cold <input checked="" type="checkbox"/> Unknown) <input type="checkbox"/> No AC Air Bags: <input type="checkbox"/> Driver's Side <input checked="" type="checkbox"/> Dual <input checked="" type="checkbox"/> Cruise Control <input checked="" type="checkbox"/> Tilt Steering <input checked="" type="checkbox"/> Remote Mirrors <input type="checkbox"/> Climate Control Power: <input checked="" type="checkbox"/> Steering <input checked="" type="checkbox"/> Windows <input checked="" type="checkbox"/> Door Locks <input type="checkbox"/> Seats																			
Additional Equipment: _____ Manufacturer _____ Model _____ Serial # _____ <input type="checkbox"/> Tool Box <input type="checkbox"/> Light Bar <input type="checkbox"/> Ladder Rack <input type="checkbox"/> Utility Body: Brand _____ <input type="checkbox"/> Hitch: Type _____																			
Location of Asset: _____ For more information contact: _____ Reminder: Do not close items on or surrounding a Holiday, on Friday nights, or Weekends. Stagger closing times by 10 minutes.																			

2/18/'26 9:26 AM



The County of Galveston
Jeff's Auction Checklist

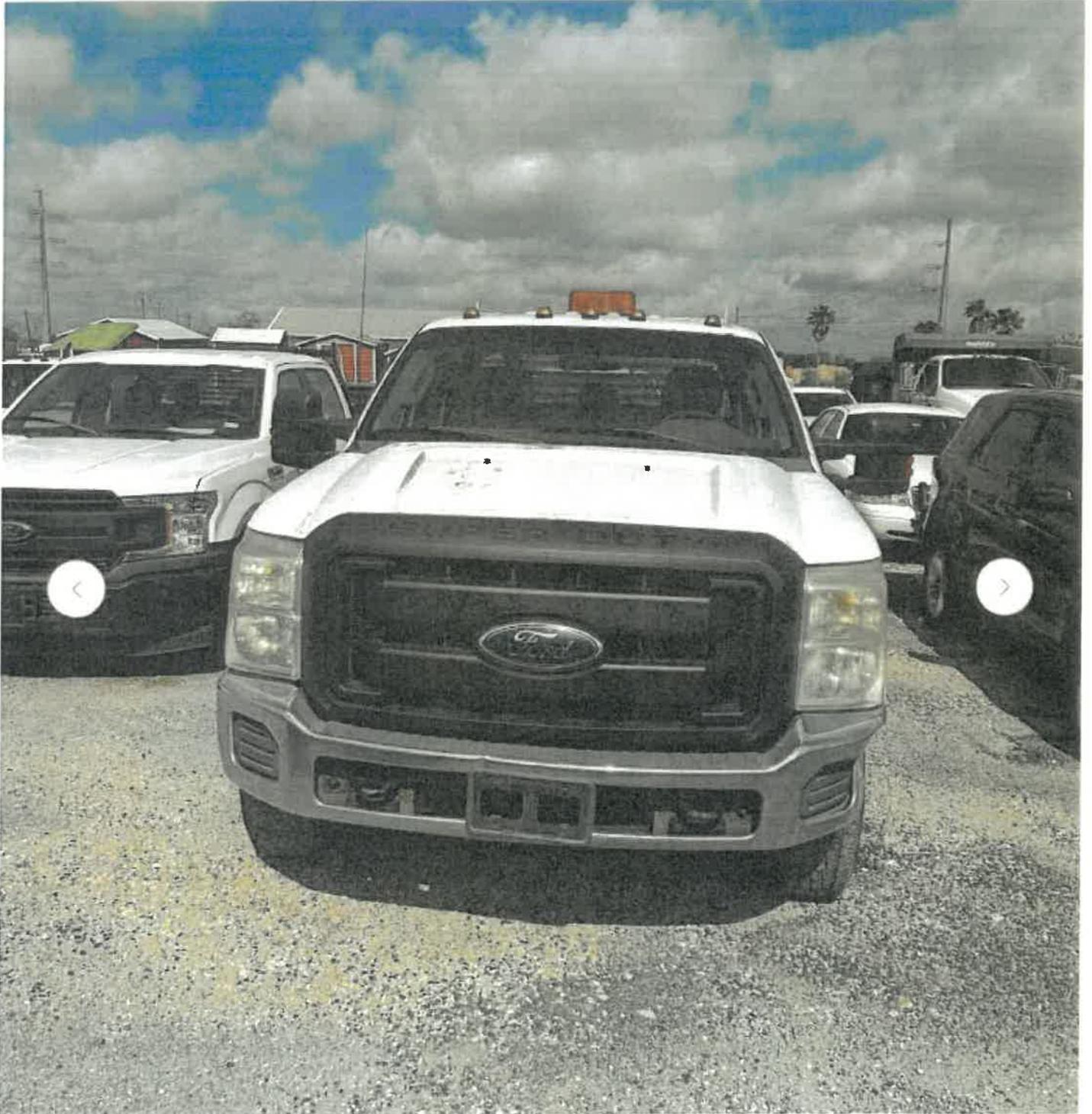
	REMARKS	DATE
UNIT#	7101	12/2
LICENSE PLATE NUMBER	112394	12/2
DESTROYED LICENSE PLATE AND REGISTRATION STICKER	YES	12/2
TELEMATICS REMOVAL	YES	12/2
TELEMATICS SERIAL NUMBER	GV7A-HN8-RPT	12/2
DECALS REMOVED	YES	12/2
RADIO REMOVED	N/A	12/2
RADIO SERIAL NUMBER	N/A	12/2
LIGHTS (POLICE) REMOVED	N/A	12/2
FIRE EXTINGUISHER REMOVED	YES	12/2
TOOL BOX REMOVED	STAYS W/ TRUCK	12/2
FUEL CELL REMOVED	N/A	12/2
MECHANIC PRINT NAME AND SIGNATURE AND DATE	SAMUEL BALSWEN 	12/2/25
MANAGER SIGNATURE AND DATE		

4446 1720



1/16/1700









ASSET DISPOSAL REPORT

DATE: 3/2/2026

To: Purchasing Department, Attention: Fixed Asset Property Manager

From: 172111 / FLEET MGMT

Department No. & Name, Department Asset Custodian Authorized Signature

[Handwritten 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: 32228 CHEVORLET TAHOE
FAID No.

Reason for disposal: AGE OF ASSET, ASSET HAS BEEN REPLACED

Serial No./VIN #: 1GNLCDEC5HR239119

From: 172111 FLEET MGMT
Department No. & Name

Location: 2875 NICHOLAS AVE DICKINSON
Building, Floor, Suite, or Room No.

Comments:

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS

PURCHASING DEPARTMENT USE ONLY

3/5/2026
Date Form Processed

[Handwritten signature]
Fixed Asset Property Manager



FLEET PRE-AUCTION DISCLOSURE FORM

DATE: 3/2/2026

To: Purchasing Department, Attention: Fixed Asset Property Manager

From: [Signature] ELIZABETH BRYANT 172111/FLEET MGMT
Signature Print Name Department/Division

Re: Pre-auction vehicle disclosure

Disposal of FAID No: 32228 Description: 2017 CHEVORLET TAHOE Starting Bid:

Unit # C4741 Serial/VIN: 1GNLCDEC5HR239119 Mileage: 155179

Reason for Disposal: AGE / MILAGE / ASSET HAS BEEN REPLACED

Has this vehicle ever been in a wreck? Yes No If Yes, what year.

What type of damaged resulted from wreck?

List any engine issues:

List any transmission issues:

List any fluid leaks (oil, fuel, radiator, transmission, etc.)

Are all tires road-worthy? Yes No If No, please explain:

Is there a spare tire? Yes No Is the full jack present? Yes No

Other: PLEASE REFERENCE FINAL REPORT

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS

PURCHASING DEPARTMENT USE ONLY

3/5/2026
Date Form Processed

[Signature]
Fixed Asset Property Manager

Vehicle Inspection Form

Inventory ID: <u>4741</u>	Asset Number:	Fair Market Value:																	
Short Description: Year <u>2017</u> Make <u>Chev.</u> Model <u>Tahoe</u>																			
VIN: <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr><td>1</td><td>G</td><td>N</td><td>L</td><td>C</td><td>O</td><td>E</td><td>C</td><td>5</td><td>H</td><td>N</td><td>2</td><td>3</td><td>9</td><td>1</td><td>1</td><td>9</td></tr> </table>		1	G	N	L	C	O	E	C	5	H	N	2	3	9	1	1	9	Title Restriction: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
1	G	N	L	C	O	E	C	5	H	N	2	3	9	1	1	9			
Odometer: <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr><td>1</td><td>5</td><td>5</td><td>1</td><td>8</td><td>0</td></tr> </table> <input checked="" type="checkbox"/> Miles <input type="checkbox"/> Kilometers		1	5	5	1	8	0	Odometer Accurate <input checked="" type="checkbox"/> Y <input type="checkbox"/> N: _____											
1	5	5	1	8	0														
Long Description: This Vehicle: <input checked="" type="checkbox"/> Starts <input type="checkbox"/> Starts with a Boost & <input checked="" type="checkbox"/> Runs/Driveable <input type="checkbox"/> Engine Runs <input type="checkbox"/> Does Not Run <input type="checkbox"/> For Parts Only Engine- Type: <u>L, V 6</u> <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Diesel Engine <input type="checkbox"/> Propane/Natural Gas <input type="checkbox"/> Gas/Electric Hybrid Engine Condition: <input checked="" type="checkbox"/> Runs <input type="checkbox"/> Needs repair <input type="checkbox"/> is in unknown condition Repairs needed: _____ This vehicle was maintained every _____ <input type="checkbox"/> Days <input type="checkbox"/> Hours <input type="checkbox"/> Miles Date Removed From Service: _____ Maintenance Records: <input type="checkbox"/> Available <input type="checkbox"/> Not Available For Inspection Transmission: <input checked="" type="checkbox"/> Automatic <input type="checkbox"/> Manual Speed Condition: <input checked="" type="checkbox"/> Operable <input type="checkbox"/> Needs repair <input type="checkbox"/> Is Unknown Condition Repairs Needed: _____ Drivetrain: <input checked="" type="checkbox"/> 2 Wheel Drive <input type="checkbox"/> 4 Wheel Drive Condition: _____																			
Exterior: Color: <u>white</u> Windows: <input checked="" type="checkbox"/> No Cracked Glass <input type="checkbox"/> Cracked _____ Minor: <input type="checkbox"/> Dents <input checked="" type="checkbox"/> Scratches <input type="checkbox"/> Dings Tire Condition: <u>Good</u> Tread: _____ #Flat _____ Hubcaps # _____ Major Damage to: _____ Additional Damage: _____ Decals: <input type="checkbox"/> None <input type="checkbox"/> Have Been Sprayed or <input checked="" type="checkbox"/> Have been Removed & <input checked="" type="checkbox"/> Impressions Remain <input type="checkbox"/> No Impressions Emergency equip: <input type="checkbox"/> None <input checked="" type="checkbox"/> Has been removed & <input checked="" type="checkbox"/> There are holes in the exterior <input type="checkbox"/> There are no holes																			
Interior: Color <u>black</u> <input checked="" type="checkbox"/> Cloth <input checked="" type="checkbox"/> Vinyl <input type="checkbox"/> Leather Damage to Seats: <u>passenger seat stained, center console doesn't open</u> Damage to Dash/Floor: _____ Radio: <input checked="" type="checkbox"/> Stock or <input type="checkbox"/> Brand & Model: _____ <input type="checkbox"/> AM <input checked="" type="checkbox"/> AM/FM <input type="checkbox"/> AM/FM Cassette <input type="checkbox"/> AM/FM CD <input checked="" type="checkbox"/> AC (Condition: <input checked="" type="checkbox"/> Cold <input type="checkbox"/> Unknown) <input type="checkbox"/> No AC Air Bags: <input type="checkbox"/> Driver's Side <input checked="" type="checkbox"/> Dual <input checked="" type="checkbox"/> Cruise Control <input checked="" type="checkbox"/> Tilt Steering <input checked="" type="checkbox"/> Remote Mirrors <input checked="" type="checkbox"/> Climate Control Power: <input type="checkbox"/> Steering <input checked="" type="checkbox"/> Windows <input checked="" type="checkbox"/> Door Locks <input checked="" type="checkbox"/> Seats																			
Additional Equipment: _____ Manufacturer _____ Model _____ Serial # _____ <input type="checkbox"/> Tool Box <input type="checkbox"/> Light Bar <input type="checkbox"/> Ladder Rack <input type="checkbox"/> Utility Body: Brand _____ <input type="checkbox"/> Hitch: Type _____																			
Location of Asset: _____ For more information contact: _____ Reminder: Do not close items on or surrounding a Holiday, on Friday nights, or Weekends. Stagger closing times by 10 minutes.																			



ASSET TRANSFER REQUEST

Date: 7/22/2024

To: Purchasing Department, Fixed Asset Property Manager

Transferor: [Signature] ELIZABETH BRYANT Department / Division: 172111/FLEET MGT
(Authorized Asset Custodian Signature) (Print Name)

Receiver: [Signature] MARK A. GARCIJA Department / Division: 170100/FACILITIES
(Authorized Asset Custodian Signature) (Print Name)

RE: Please amend the inventory to reflect the following change(s) due to TRANSFER

Transfer 32228 Unit # C3741 Description 2017 CHEVY TAHOE Serial/VIN 39119
(FAIDR, last 5 digits) (last 5 digits)
From 172111/FLEET MGMT Location 2875 NICHOLS AVE DKN 77539
(Department/Division Name) (Building, Floor, Suite or Room No)
To 170100 / FACILITIES SRV & MAIN Location 722 MOODY 6TH FLOOR
(Department/Division Name) (Building, Floor, Suite or Room No)
Reason for Transfer NEW ASSET TO FACILITIES CLEANING CREW. ALSO UNIT NUMBER WILL CHANGE TO C4741

Transfer Unit # Description Serial/VIN
(FAIDR, last 5 digits) (last 5 digits)
From Location
(Department/Division Name) (Building, Floor, Suite or Room No)
To Location
(Department/Division Name) (Building, Floor, Suite or Room No)
Reason for Transfer

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PURCHASING DEPARTMENT USE ONLY

7/23/2024
Date Form Processed

[Signature]
Fixed Asset Property Manager

16/Printed As req/FA Form/FA-02, Transfer
revised 10/03/2020

2/18/'26 9:27 AM



The County of Galveston
Jeff's Auction Checklist

	REMARKS	DATE
UNIT#	4741	12/23/25
LICENSE PLATE NUMBER	1594450	12/23/25
DESTROYED LICENSE PLATE AND REGISTRATION STICKER	yes	12/23/25
TELEMATICS REMOVAL	yes	12/23/25
TELEMATICS SERIAL NUMBER	G9MT-K6Y-8X2	12/23/25
DECALS REMOVED	yes	12/23/25
RADIO REMOVED	N/A	12/23/25
RADIO SERIAL NUMBER	N/A	12/23/25
LIGHTS (POLICE) REMOVED	N/A	12/23/25
FIRE EXTINGUISHER REMOVED	yes	12/23/25
TOOL BOX REMOVED	N/A	12/23/25
FUEL CELL REMOVED	N/A	12/23/25
MECHANIC PRINT NAME AND SIGNATURE AND DATE	Kenner Trammell 12/23/25	
MANAGER SIGNATURE AND DATE		

1540 4300





146 1736



11/16/17





ASSET DISPOSAL REPORT

DATE: 3/2/2026

To: Purchasing Department, Attention: Fixed Asset Property Manager

From: 172111 / FLEET MGMT [Signature]
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
Theft
Destroyed by
Trade-In
Donated

Disposal of: 32238 FORD EXPLORER
Reason for disposal: AGE OF ASSET, ASSET HAS BEEN REPLACED
Serial No./VIN #: 1FM5K8AR1HGD06554

From: 172111 FLEET MGMT Location: 2875 NICHOLAS AVE DICKINSON

Comments:

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PURCHASING DEPARTMENT USE ONLY

3/5/2026
Date Form Processed

[Signature]
Fixed Asset Property Manager



FLEET PRE-AUCTION DISCLOSURE FORM

DATE: 3/2/2026

To: Purchasing Department, Attention: Fixed Asset Property Manager

From: [Signature] ELIZABETH BRYANT 172111/FLEET MGMT
Signature Print Name Department/Division

Re: Pre-auction vehicle disclosure

Starting Bid:
Disposal of FAID No: 32238 Description: 2017 FORD EXPLORER
Unit # C1605 Serial/VIN: 1FM5K8AR1HGD06554 Mileage: 98789
Reason for Disposal: AGE / MILAGE / ASSET HAS BEEN REPLACED

Has this vehicle ever been in a wreck? Yes No If Yes, what year.

What type of damaged resulted from wreck?

List any engine issues:

List any transmission issues:

List any fluid leaks (oil, fuel, radiator, transmission, etc.)

Are all tires road-worthy? Yes No If No, please explain:

Is there a spare tire? Yes No Is the full jack present? Yes No

Other: PLEASE REFERENCE FINAL INSPECTION REPORT

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS

PURCHASING DEPARTMENT USE ONLY

3/5/2026
Date Form Processed

[Signature]
Fixed Asset Property Manager

Vehicle Inspection Form

Inventory ID: <u>1605</u>	Asset Number: _____	Fair Market Value: _____																	
Short Description: Year <u>2016</u> Make <u>Ford</u> Model <u>Explorer</u>																			
VIN: <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr><td>1</td><td>F</td><td>M</td><td>5</td><td>K</td><td>8</td><td>A</td><td>R</td><td>1</td><td>H</td><td>G</td><td>D</td><td>0</td><td>6</td><td>5</td><td>5</td><td>4</td></tr> </table> Title Restriction: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N			1	F	M	5	K	8	A	R	1	H	G	D	0	6	5	5	4
1	F	M	5	K	8	A	R	1	H	G	D	0	6	5	5	4			
Odometer: <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr><td>9</td><td>8</td><td>7</td><td>9</td><td>0</td></tr> </table> <input checked="" type="checkbox"/> Miles <input type="checkbox"/> Kilometers Odometer Accurate <input checked="" type="checkbox"/> Y <input type="checkbox"/> N: _____			9	8	7	9	0												
9	8	7	9	0															
Long Description: This Vehicle: <input type="checkbox"/> Starts <input checked="" type="checkbox"/> Starts with a Boost & <input checked="" type="checkbox"/> Runs/Driveable <input type="checkbox"/> Engine Runs <input type="checkbox"/> Does Not Run <input type="checkbox"/> For Parts Only Engine- Type: <u>L, V 6</u> <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Diesel Engine <input type="checkbox"/> Propane/Natural Gas <input type="checkbox"/> Gas/Electric Hybrid Engine Condition: <input checked="" type="checkbox"/> Runs <input type="checkbox"/> Needs repair <input type="checkbox"/> is in unknown condition Repairs needed: _____ This vehicle was maintained every _____ <input type="checkbox"/> Days <input type="checkbox"/> Hours <input type="checkbox"/> Miles Date Removed From Service: _____ Maintenance Records: <input type="checkbox"/> Available <input type="checkbox"/> Not Available For Inspection Transmission: <input checked="" type="checkbox"/> Automatic <input type="checkbox"/> Manual Speed Condition: <input checked="" type="checkbox"/> Operable <input type="checkbox"/> Needs repair <input type="checkbox"/> Is Unknown Condition Repairs Needed: _____ Drivetrain: <input checked="" type="checkbox"/> 2 Wheel Drive <input type="checkbox"/> 4 Wheel Drive Condition: _____ Exterior: Color: <u>Red</u> Windows: <input checked="" type="checkbox"/> No Cracked Glass <input type="checkbox"/> Cracked Minor: <input type="checkbox"/> Dents <input checked="" type="checkbox"/> Scratches <input type="checkbox"/> Dings Tire Condition: <u>Fair</u> Tread: _____ #Flat Hubcaps # _____ Major Damage to: <u>clear coat peeling on hood</u> Additional Damage: _____ Decals: <input checked="" type="checkbox"/> None <input type="checkbox"/> Have Been Sprayed or <input type="checkbox"/> Have been Removed & <input type="checkbox"/> Impressions Remain <input type="checkbox"/> No Impressions Emergency equip: <input type="checkbox"/> None <input type="checkbox"/> Has been removed & <input type="checkbox"/> There are holes in the exterior <input type="checkbox"/> There are no holes Interior: Color <u>black</u> <input checked="" type="checkbox"/> Cloth <input type="checkbox"/> Vinyl <input type="checkbox"/> Leather Damage to Seats: _____ Damage to Dash/Floor: <u>carpet ripped passenger side</u> Radio: <input checked="" type="checkbox"/> Stock or <input type="checkbox"/> Brand & Model: _____ <input type="checkbox"/> AM <input type="checkbox"/> AM/FM <input type="checkbox"/> AM/FM Cassette <input checked="" type="checkbox"/> AM/FM CD <input checked="" type="checkbox"/> AC (Condition: <input checked="" type="checkbox"/> Cold <input type="checkbox"/> Unknown) <input type="checkbox"/> No AC Air Bags: <input type="checkbox"/> Driver's Side <input type="checkbox"/> Dual <input checked="" type="checkbox"/> Cruise Control <input checked="" type="checkbox"/> Tilt Steering <input checked="" type="checkbox"/> Remote Mirrors <input checked="" type="checkbox"/> Climate Control Power: <input checked="" type="checkbox"/> Steering <input checked="" type="checkbox"/> Windows <input checked="" type="checkbox"/> Door Locks <input checked="" type="checkbox"/> Seats Additional Equipment: _____ Manufacturer _____ Model _____ Serial # _____ <input type="checkbox"/> Tool Box <input type="checkbox"/> Light Bar <input type="checkbox"/> Ladder Rack <input type="checkbox"/> Utility Body: Brand _____ <input type="checkbox"/> Hitch: Type _____																			
Location of Asset: _____ For more information contact: _____ Reminder: Do not close items on or surrounding a Holiday, on Friday nights, or Weekends. Stagger closing times by 10 minutes.																			

2/18/26 9:26 AM



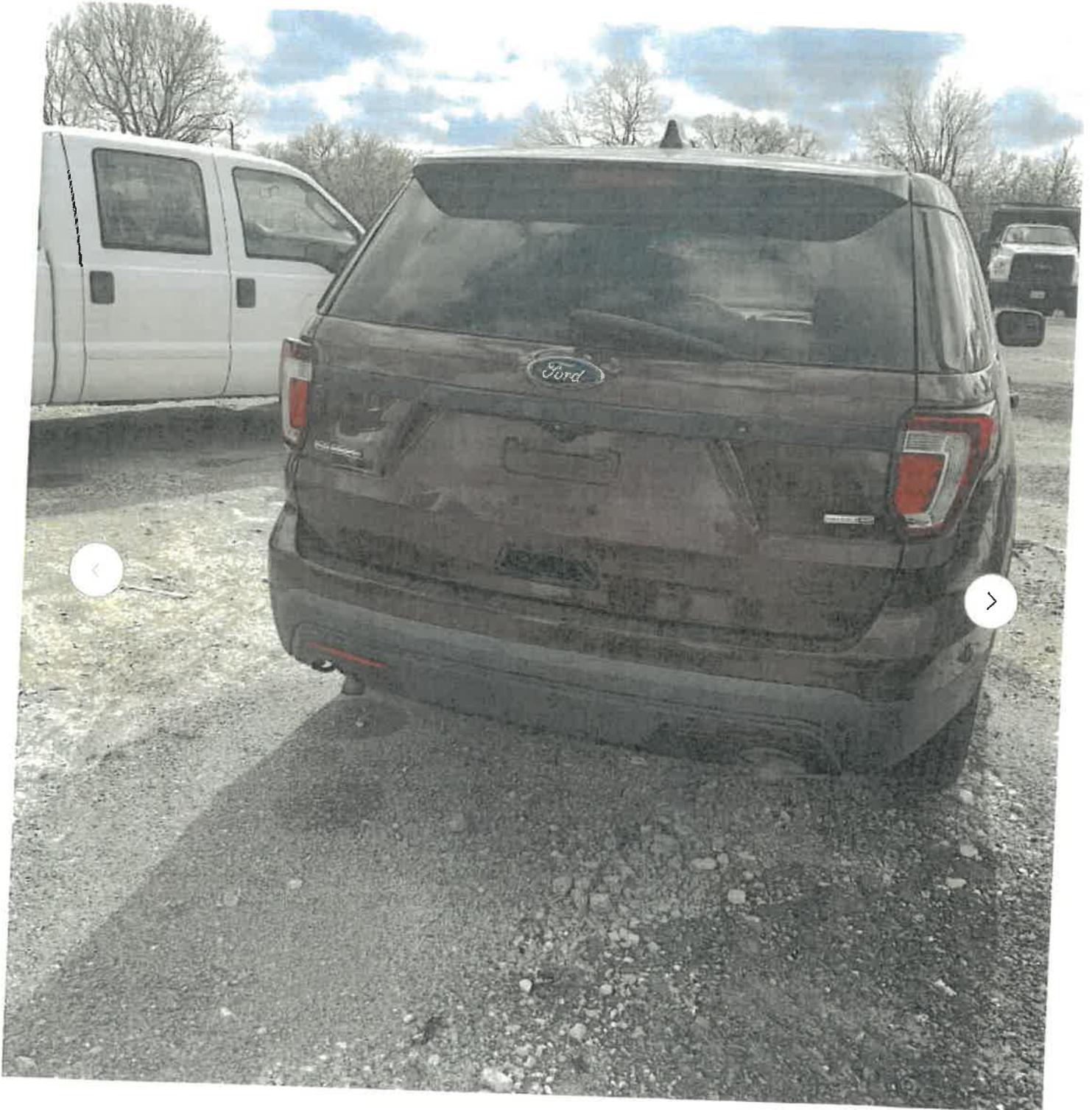
The County of Galveston
Jeff's Auction Checklist

	REMARKS	DATE
UNITS	1605	12/22/25
LICENSE PLATE NUMBER	JSN 2443	12/22/25
DESTROYED LICENSE PLATE AND REGISTRATION STICKER	yes	12/22/25
TELEMATICS REMOVAL	None	12/22/25
TELEMATICS SERIAL NUMBER	N/A	12/22/25
DECALS REMOVED	yes	12/22/25
RADIO REMOVED	yes	12/22/25
RADIO SERIAL NUMBER	N/A	12/22/25
LIGHTS (POLICE) REMOVED	yes	12/22/25
FIRE EXTINGUISHER REMOVED	yes	12/22/25
TOOL BOX REMOVED	N/A	12/22/25
FUEL CELL REMOVED	N/A	12/22/25
MECHANIC PRINT NAME AND SIGNATURE AND DATE	Kenner Trammell	12/22/25
MANAGER SIGNATURE AND DATE		

1/16/2025

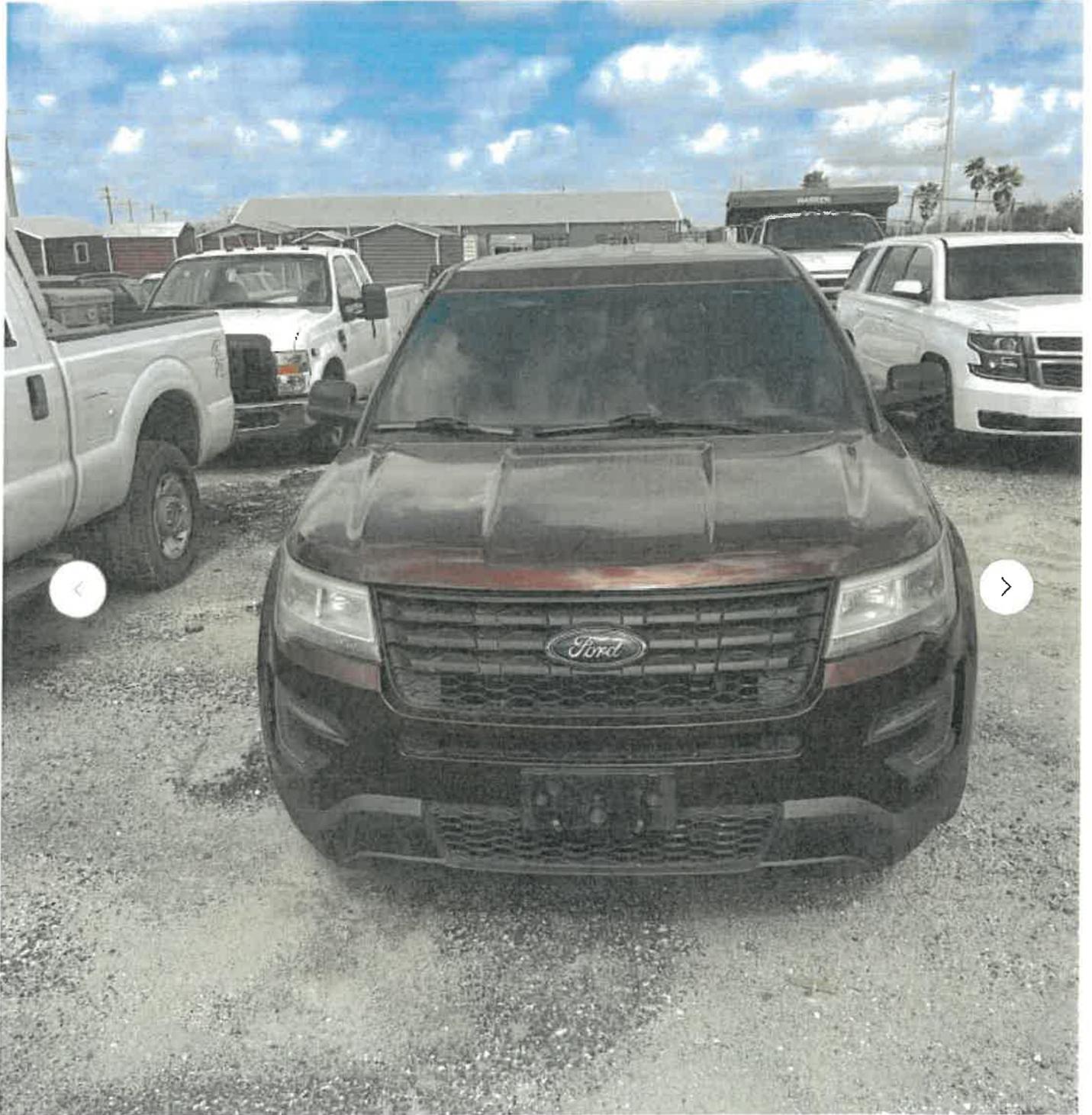


01/16/2020



4416 1733







ASSET DISPOSAL REPORT

DATE: 3/2/2026

To: Purchasing Department, Attention: Fixed Asset Property Manager

From: 172111 / FLEET MGMT

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
Theft
Destroyed by
Trade-In
Donated

Disposal of: 32364 JEEP WRANGLER

Reason for disposal: AGE OF ASSET, ASSET HAS BEEN REPLACED

Serial No./VIN #: 1C4BJWDG3JL899288

From: 172111 FLEET MGMT

Location: 2875 NICHOLAS AVE DICKINSON

Comments:

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PURCHASING DEPARTMENT USE ONLY

3/5/2026
Date Form Processed

Edward J. ...
Fixed Asset Property Manager



FLEET PRE-AUCTION DISCLOSURE FORM

DATE: 3/2/2026

To: Purchasing Department, Attention: Fixed Asset Property Manager

From: [Signature] ELIZABETH BRYANT 172111/FLEET MGMT
Signature Print Name Department/Division

Re: Pre-auction vehicle disclosure

Starting Bid:

Disposal of FAID No: 32364 Description: 2018 JEEP WRANGLER

Unit # C3818 Serial/VIN: 1C4BJWDG3JL899288 Mileage: 76622

Reason for Disposal: AGE / MILAGE / ASSET HAS BEEN REPLACED

Has this vehicle ever been in a wreck? Yes No If Yes, what year.

What type of damaged resulted from wreck?

List any engine issues:

List any transmission issues:

List any fluid leaks (oil, fuel, radiator, transmission, etc.)

Are all tires road-worthy? Yes No If No, please explain:

Is there a spare tire? Yes No Is the full jack present? Yes No

Other: PLEASE REFERENCE FINAL INSPECTION REPORT

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PURCHASING DEPARTMENT USE ONLY

3/5/2026
Date Form Processed

[Signature]
Fixed Asset Property Manager

Vehicle Inspection Form

Inventory ID: <u>3818</u>	Asset Number: _____	Fair Market Value: _____																	
Short Description: Year <u>2018</u> Make <u>Jeep</u> Model <u>Wrangler</u>																			
VIN: <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr><td>1</td><td>C</td><td>4</td><td>B</td><td>J</td><td>w</td><td>0</td><td>G</td><td>3</td><td>J</td><td>L</td><td>B</td><td>9</td><td>9</td><td>2</td><td>8</td><td>8</td></tr> </table> Title Restriction: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N			1	C	4	B	J	w	0	G	3	J	L	B	9	9	2	8	8
1	C	4	B	J	w	0	G	3	J	L	B	9	9	2	8	8			
Odometer: <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr><td>7</td><td>6</td><td>6</td><td>2</td><td>4</td></tr> </table> <input checked="" type="checkbox"/> Miles <input type="checkbox"/> Kilometers Odometer Accurate <input checked="" type="checkbox"/> Y <input type="checkbox"/> N: _____			7	6	6	2	4												
7	6	6	2	4															
Long Description: This Vehicle: <input checked="" type="checkbox"/> Starts <input type="checkbox"/> Starts with a Boost & <input type="checkbox"/> Runs/Driveable <input checked="" type="checkbox"/> Engine Runs <input type="checkbox"/> Does Not Run <input type="checkbox"/> For Parts Only Engine- Type: <u>L, V 6</u> <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Diesel Engine <input type="checkbox"/> Propane/Natural Gas <input type="checkbox"/> Gas/Electric Hybrid Engine Condition: <input checked="" type="checkbox"/> Runs <input type="checkbox"/> Needs repair <input type="checkbox"/> is in unknown condition Repairs needed: <u>brakes are sticking</u> This vehicle was maintained every _____ <input type="checkbox"/> Days <input type="checkbox"/> Hours <input type="checkbox"/> Miles Date Removed From Service: _____ Maintenance Records: <input type="checkbox"/> Available <input type="checkbox"/> Not Available For Inspection Transmission: <input checked="" type="checkbox"/> Automatic <input type="checkbox"/> Manual Speed Condition: <input checked="" type="checkbox"/> Operable <input type="checkbox"/> Needs repair <input type="checkbox"/> Is Unknown Condition Repairs Needed: _____ Drivetrain: <input type="checkbox"/> 2 Wheel Drive <input checked="" type="checkbox"/> 4 Wheel Drive Condition: <u>works</u>																			
Exterior: Color: <u>white</u> Windows: <input type="checkbox"/> No Cracked Glass <input checked="" type="checkbox"/> Cracked <u>front windshield</u> Minor: <input type="checkbox"/> Dents <input checked="" type="checkbox"/> Scratches <input type="checkbox"/> Dings Tire Condition: <u>Good</u> Tread: _____ #Flat _____ Hubcaps # _____ Major Damage to: _____ Additional Damage: _____ Decals: <input type="checkbox"/> None <input type="checkbox"/> Have Been Sprayed or <input checked="" type="checkbox"/> Have been Removed & <input checked="" type="checkbox"/> Impressions Remain <input type="checkbox"/> No Impressions Emergency equip: <input type="checkbox"/> None <input type="checkbox"/> Has been removed & <input type="checkbox"/> There are holes in the exterior <input type="checkbox"/> There are no holes																			
Interior: Color <u>black</u> <input checked="" type="checkbox"/> Cloth <input type="checkbox"/> Vinyl <input type="checkbox"/> Leather Damage to Seats: _____ Damage to Dash/Floor: _____ Radio: <input checked="" type="checkbox"/> Stock or <input type="checkbox"/> Brand & Model: _____ <input type="checkbox"/> AM <input type="checkbox"/> AM/FM <input type="checkbox"/> AM/FM Cassette <input checked="" type="checkbox"/> AM/FM CD <input checked="" type="checkbox"/> AC (Condition: <input checked="" type="checkbox"/> Cold <input type="checkbox"/> Unknown) <input type="checkbox"/> No AC Air Bags: <input checked="" type="checkbox"/> Driver's Side <input checked="" type="checkbox"/> Dual <input checked="" type="checkbox"/> Cruise Control <input checked="" type="checkbox"/> Tilt Steering <input checked="" type="checkbox"/> Remote Mirrors <input type="checkbox"/> Climate Control Power: <input type="checkbox"/> Steering <input checked="" type="checkbox"/> Windows <input checked="" type="checkbox"/> Door Locks <input type="checkbox"/> Seats																			
Additional Equipment: _____ Manufacturer _____ Model _____ Serial # _____ <input type="checkbox"/> Tool Box <input type="checkbox"/> Light Bar <input type="checkbox"/> Ladder Rack <input type="checkbox"/> Utility Body: Brand _____ <input type="checkbox"/> Hitch: Type _____																			
Location of Asset: <u>Dickinson stockyard</u> For more information contact: _____ Reminder: Do not close items on or surrounding a Holiday, on Friday nights, or Weekends. Stagger closing times by 10 minutes.																			

2/18/26 9:27 AM



ASSET TRANSFER REQUEST

Date: 10/09/2025

To: Purchasing Department, Fixed Asset Property Manager

Transferor: [Signature] (Authorized Asset Custodian Signature) [Print Name] (Print Name) Department / Division: SHERIFF

Receiver: [Signature] (Authorized Asset Custodian Signature) ELIZABETH BRYANT (Print Name) Department / Division: 172111/FLEET MGMT

RE: Please amend the inventory to reflect the following change(s) due to TRANSFER

Transfer 32507 (FAID#, last 5 digits) Unit # C3819 Description 2018 JEEP WRANGLER Serial/VIN 08606 (last 5 digits) From SHERIFF (Department/Division Name) Location (Building, Floor, Suite or Room No) To 172111/FLEET MGMT (Department/Division Name) Location 2875 NICHOLAS AVE, DKN 77539 (Building, Floor, Suite or Room No) Reason for Transfer AGE / MILAGE OF ASSET

Transfer 32364 (FAID#, last 5 digits) Unit # C3818 Description 2018 JEEP WRANGLER Serial/VIN 99288 (last 5 digits) From SHERIFF (Department/Division Name) Location (Building, Floor, Suite or Room No) To 172111/FLEET MGMT (Department/Division Name) Location 2875 NICHOLAS AVE. DKN 77539 (Building, Floor, Suite or Room No) Reason for Transfer

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PURCHASING DEPARTMENT USE ONLY

3/5/2026 Date Form Processed

[Signature] Fixed Asset Property Manager

w/ Fixed Assets/FA Forms/FA-02, Transfer revised 10/05/2020



The County of Galveston
Jeff's Auction Checklist

	REMARKS	DATE
UNIT#	C3818	1/2/26
LICENSE PLATE NUMBER	143 3891	1/2/26
DESTROYED LICENSE PLATE AND REGISTRATION STICKER	yes	1/2/26
TELEMATICS REMOVAL	yes	1/2/26
TELEMATICS SERIAL NUMBER	N/A	1/2/26
DECALS REMOVED	yes	1/2/26
RADIO REMOVED	yes	1/2/26
RADIO SERIAL NUMBER	N/A	1/2/26
LIGHTS (POLICE) REMOVED	yes	1/2/26
FIRE EXTINGUISHER REMOVED	yes	1/2/26
TOOL BOX REMOVED	N/A	1/2/26
FUEL CELL REMOVED	N/A	1/2/26
MECHANIC PRINT NAME AND SIGNATURE AND DATE	Zach Marsh <i>Zach Marsh</i>	1/2/26
MANAGER SIGNATURE AND DATE	<i>[Signature]</i>	1-2-2026

10/11/16 17:24





5/11/2015



1116 1724

