

COUNTY OF EL DORADO PROPERTY TRANSFER REQUEST			
(SURPLUS)		p INTERDEPARTMENT	
TRANSFER FROM (INDEX CODE) <i>412000</i>		TRANSFER TO (INDEX CODE)	
DEPARTMENT: <i>Mental Health PHF Psychiatric Facility</i>		DEPARTMENT:	
APPROVED (DEPT HEAD) <i>Ron Wane</i>	DATE <i>8/16/00</i>	APPROVED (DEPT HEAD)	DATE

SPECIFIC LOCATION: (ADDRESS) *935-B Spring Street, Placerville, CA 95667*
 Where in Facility? *Hallway of Admin Wing*
 FIRST CONTACT PERSON: *Cheryl Ingham* PHONE *621-6296*
 SECOND CONTACT PERSON *Michelle McAfee* PHONE *621-6309*

COUNTY TAG #	DESCRIPTION	SERIAL/VIN #	CONDITION
<i>—</i>	<i>Xerox Copier</i>	<i>KM 9045475</i>	<i>Good</i>

CENTRAL SERVICES USE ONLY DATE	
POSTED	
PICKUP BY CS	
BOARD LETTER	
PICKUP BY VENDOR	
COPY TO AUDITOR	

REMARKS: _____ _____ AUDITOR RECORDS UPDATED BY _____ DATE _____ ALL PARTS OF FORM GO TO GENERAL SERVICES AT START OF PROCESS. UPON COMPLETION DISTRIBUTION WILL OCCUR WHITE (AUDITOR) YELLOW (TO DEPT.) PINK (FROM DEPT) GOLD (CENTRAL SERVICES)
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