	C		ORADO PROPERTY		
p surplus Transfe.			R REQUEST  p INTERDEPARTMENT		
					TRANSFER FROM (INDEX CODE)
411000					
DEPARTMENT: Mental Nealth administration			DEPARTMENT:		
APPROVED (DEPT HEAD)  DATE  SIG(6)			APPROVED (DEPT HEAD)	DATE	
SPECIFIC LOCATION: (AD	DRESS) <u>344</u>	Placeroi	lle Dr. Ste 20, P)	lacerville, ca 95	
Where in Facility?	t to Rec	reption a	kea		
FIRST CONTACT PERSON	: Cher	y (night			
SECOND CONTACT PERS	ON Mich	me ale	) PHONE 621-	6309	
		0	·		
COUNTY TAG #	DESC	CRIPTION	SERIAL/VIN#	CONDITION	
COUNTI TAG#			SERIALI VIII #	CONDITION	
	Voun	Copies	691500144	Good	
-	<u> </u>	aguer	01/00011	2000	
				and the second	
		······································			
CENTRAL SERVICES	LISE ONLY	F			
DATE			REMARKS:		
POSTED		REMARKS:			
	:				
PICKUP BY CS		AUDITOR R	ECORDS UPDATED BY		
·		DATE			
BOARD LETTER					
		ALL PARTS	OF FORM GO TO GENERAL	SERVICES AT START OF	
PICKUP BY VENDOR		PROCESS. UPON COMPLETION DISTRIBUTION WILL OCCUR WHITE (AUDITOR) YELLOW (TO DEPT.)			
					COPY TO AUDITOR