

CERTIFIED COPY OF ORDER

STATE OF MISSOURI }
County of Boone } ea.

April Session of the April Adjourned

Term. 20 16

In the County Commission of said county, on the 21st day of April 20 16

the following, among other proceedings, were had, viz:

Now on this day the County Commission of the County of Boone does hereby approve the request by the Purchasing Department to dispose of the attached list of surplus equipment by auction on GovDeals or by destruction for whatever is not suitable for auction.

It is further ordered the Presiding Commissioner is hereby authorized to sign said Request for Disposal forms.

Done this 21st day of April, 2016

ATTEST:

Wendy S. Noren
Wendy S. Noren
Clerk of the County Commission

Daniel K. Atwill
Daniel K. Atwill
Presiding Commissioner

Karen M. Miller
Karen M. Miller
District I Commissioner

Janet M. Thompson
Janet M. Thompson
District II Commissioner

Boone County Purchasing
David Eagle
Purchasing Assistant



613 E. Ash Street
Columbia, MO 65201
Phone: (573) 886-4394

MEMORANDUM

TO: Boone County Commission
FROM: David Eagle
RE: Surplus Disposal
DATE: April 14, 2016

The Purchasing Departments requests permission to dispose of the following list of surplus equipment by auction on GovDeals or by destruction for whatever is not suitable for auction.

	Asset #	Description	Make & Model	Department	Condition of Asset	
1.	10317	ARMLESS BLUE CHAIR		CIRCUIT COURT	POOR	
3	NO TAG	OLD FRONT COUNTER MICROPHONE		CIRCUIT COURT	POOR	REMOVE FROM INVENTORY
4	NO TAG	BOX OF OLD FOLDER FILES		CIRCUIT COURT	FAIR	
5	NO TAG	PLASTIC CHAIR		CIRCUIT COURT	FAIR	
6	NO TAG	ARMLESS BLUE CHAIR		CIRCUIT COURT	FAIR	
7	NO TAG	CLOTH CHAIR		CIRCUIT COURT	POOR	REMOVE FROM INVENTORY
8	NO TAG	ONE BOX OF NON WORKING CALCULATORS		CIRCUIT COURT	POOR	REMOVE FROM INVENTORY

191-2016

9	NO TAG	OLD KEYBOARD TRAY		CIRCUIT COURT	POOR	
10	NO TAG	BOX OF MISC. OFFICE SUPPLY		CIRCUIT COURT	FAIR	
11	NO TAG	MAILSORTER FOR DESK		CIRCUIT COURT	FAIR	
12	10086	CLOTH TASK CHAIR		I.T.	FAIR	REMOVE FROM INVENTORY
13	8965	PHONE	MERIDIAN MODEL NT4X35	FACILITY MAINTENANCE	FAIR	
14	NO TAG	CELL PHONES		FACILITY MAINTENANCE	POOR	
15	NO TAG	PHONE	MERIDIAN	FACILITY MAINTENANCE	POOR	
16	18127	10" MEAT SLICER	BERKEL	SHERIFF	POOR	
17	10702	STRAW BLOWER	1996 EASY LAWN SERIAL NUMBER 20801 MODEL SB228	PUBLIC WORKS	FAIR	
18	9602	1995 STONE TAMPER COMPACTOR		PUBLIC WORKS	FAIR	

cc: Heather Acton. Auditor's office
Surplus File

S:\PU\SURPLUS\COMMISSION MEMO 3-31-16.DOC

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 2/24/16 FIXED ASSET TAG NUMBER: 10317

DESCRIPTION: armless blue chair

REQUESTED MEANS OF DISPOSAL: Surplus

OTHER INFORMATION: _____

CONDITION OF ASSET: POOR-

REASON FOR DISPOSITION: No longer needed

COUNTY / COURT IT DEPT. (check one) DOES DOES NOT (check one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: 1221

SIGNATURE [Signature]

AUDITOR

ORIGINAL PURCHASE DATE 10-05-1995

RECEIPT INTO 11903836 HA

ORIGINAL COST \$249.00

GRANT FUNDED (Y/N) N

ORIGINAL FUNDING SOURCE 2731

GRANT NAME _____

% FUNDING _____

AGENCY _____

ASSET GROUP 1602

DOCUMENTATION ATTACHED (Y/N) _____

TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE ____ AUCTION ____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 191-2016

DATE APPROVED 4-21-16

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 2/24/16 FIXED ASSET TAG NUMBER: NA

DESCRIPTION: old front counter mic

REQUESTED MEANS OF DISPOSAL: surplus

OTHER INFORMATION: _____

CONDITION OF ASSET: fair

REASON FOR DISPOSITION: Did not work properly

COUNTY / COURT IT DEPT. (check one) DOES / DOES NOT (check one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer/equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP

WAS ASSET PURCHASED WITH GRANT FUNDING? YES / NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: 1221

SIGNATURE: [Signature]

AUDITOR NO DATA

ORIGINAL PURCHASE DATE _____

RECEIPT INTO 1190-3836 HA

ORIGINAL COST _____

GRANT FUNDED (Y/N) _____

ORIGINAL FUNDING SOURCE _____

GRANT NAME _____

% FUNDING _____

AGENCY _____

ASSET GROUP _____

DOCUMENTATION ATTACHED (Y/N) _____

TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE _____ AUCTION _____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 191-2016

DATE APPROVED 4-21-16

SIGNATURE [Signature]

RECEIVED
FEB 24 2016
BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 2/24/16 FIXED ASSET TAG NUMBER: NA

DESCRIPTION: Box of old folder files

REQUESTED MEANS OF DISPOSAL: Surplus

OTHER INFORMATION: _____

CONDITION OF ASSET: Fair

REASON FOR DISPOSITION: no longer needed

COUNTY / COURT IT DEPT. (check one) DOES DOES NOT (check one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: 1221

SIGNATURE: [Signature]

AUDITOR NO DATA
ORIGINAL PURCHASE DATE _____

RECEIPT INTO 1190-3836 HA

ORIGINAL COST _____ GRANT FUNDED (Y/N) _____
ORIGINAL FUNDING SOURCE _____ GRANT NAME _____
ASSET GROUP _____ % FUNDING _____
AGENCY _____
DOCUMENTATION ATTACHED (Y/N) _____
TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____
LOCATION WITHIN DEPARTMENT _____
INDIVIDUAL _____

____ TRADE _____ AUCTION _____ SEALED BIDS
____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 191-2016

DATE APPROVED 4-21-16

SIGNATURE [Signature]

RECEIVED

FEB 24 2016

BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 2/24/16 FIXED ASSET TAG NUMBER: NA

DESCRIPTION: plastic chair

REQUESTED MEANS OF DISPOSAL: Surplus

OTHER INFORMATION: _____

CONDITION OF ASSET: fair

REASON FOR DISPOSITION: do not need it

COUNTY / COURT IT DEPT. (check one) DOES DOES NOT (check one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: 1221

SIGNATURE: [Signature]

RECEIVED

FEB 24 2016

BOONE COUNTY AUDITOR

AUDITOR NO DATA
ORIGINAL PURCHASE DATE _____

RECEIPT INTO 1190-3836 NA

ORIGINAL COST _____

GRANT FUNDED (Y/N) _____

ORIGINAL FUNDING SOURCE _____

GRANT NAME _____

% FUNDING _____

AGENCY _____

ASSET GROUP _____

DOCUMENTATION ATTACHED (Y/N) _____

TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE ____ AUCTION ____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 191-2016

DATE APPROVED 4-21-16

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 2/24/16 FIXED ASSET TAG NUMBER: NA

DESCRIPTION: Armless blue Chair

REQUESTED MEANS OF DISPOSAL: Surplus

OTHER INFORMATION: _____

CONDITION OF ASSET: Fair

REASON FOR DISPOSITION: no longer needed

COUNTY / COURT IT DEPT. (check one) DOES DOES NOT (check one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: 1221

SIGNATURE: [Signature]

RECEIVED

FEB 24 2016

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL PURCHASE DATE NO DATA

RECEIPT INTO 1190-3836 HA

ORIGINAL COST _____

GRANT FUNDED (Y/N) _____

ORIGINAL FUNDING SOURCE _____

GRANT NAME _____

% FUNDING _____

AGENCY _____

ASSET GROUP _____

DOCUMENTATION ATTACHED (Y/N) _____

TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE _____ AUCTION _____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 191-2016

DATE APPROVED 4-21-16

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 2/24/16 FIXED ASSET TAG NUMBER: NA

DESCRIPTION: Cloth chair

REQUESTED MEANS OF DISPOSAL: surplus

OTHER INFORMATION: _____

CONDITION OF ASSET: POOR

REASON FOR DISPOSITION: no longer needed

COUNTY / COURT IT DEPT. (check one) DOES / DOES NOT (check one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: 1221

SIGNATURE: [Signature]

RECEIVED
FEB 24 2016
BOONE COUNTY AUDITOR

AUDITOR
ORIGINAL PURCHASE DATE NO DATA

RECEIPT INTO 1190-3836 HA

ORIGINAL COST _____

GRANT FUNDED (Y/N) _____

ORIGINAL FUNDING SOURCE _____

GRANT NAME _____

% FUNDING _____

AGENCY _____

ASSET GROUP _____

DOCUMENTATION ATTACHED (Y/N) _____

TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE ____ AUCTION ____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 191-2016

DATE APPROVED 4-21-16

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 2/24/16 FIXED ASSET TAG NUMBER: NA

DESCRIPTION: 1-Box NON working

REQUESTED MEANS OF DISPOSAL: disposal

OTHER INFORMATION: _____

CONDITION OF ASSET: poor

REASON FOR DISPOSITION: don't work

COUNTY / COURT IT DEPT. (check one) DOES / DOES NOT (check one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP

WAS ASSET PURCHASED WITH GRANT FUNDING? YES / NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: 1221

SIGNATURE [Signature]

AUDITOR NO DATA
ORIGINAL PURCHASE DATE _____

RECEIPT INTO 1190-3836 HA

ORIGINAL COST _____

GRANT FUNDED (Y/N) _____

ORIGINAL FUNDING SOURCE _____

GRANT NAME _____

% FUNDING _____

AGENCY _____

ASSET GROUP _____

DOCUMENTATION ATTACHED (Y/N) _____

TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

___ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

___ TRADE ___ AUCTION ___ SEALED BIDS

___ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 191-2016

DATE APPROVED 4-21-16

SIGNATURE [Signature]

RECEIVED
FEB 24 2016
BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE 2/24/16 FIXED ASSET TAG NUMBER: NA

DESCRIPTION: old keyboard tray

REQUESTED MEANS OF DISPOSAL: Surplus

OTHER INFORMATION: _____

CONDITION OF ASSET: POOR

REASON FOR DISPOSITION: POOR

RECEIVED

FEB 24 2016

BOONE COUNTY AUDITOR

COUNTY / COURT IT DEPT. (check one) DOES / DOES NOT (check one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: 1221

SIGNATURE Dudse Hill

AUDITOR

ORIGINAL PURCHASE DATE NO DATA

RECEIPT INTO 1190-3836 NA

ORIGINAL COST _____

GRANT FUNDED (Y/N) _____

ORIGINAL FUNDING SOURCE _____

GRANT NAME _____

% FUNDING _____

ASSET GROUP _____

AGENCY _____

DOCUMENTATION ATTACHED (Y/N) _____

TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE _____ AUCTION _____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 191-2016

DATE APPROVED 4-21-16

SIGNATURE Dudse Hill

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 2/24/16 FIXED ASSET TAG NUMBER: NA

DESCRIPTION: Box of Misc. office supply

REQUESTED MEANS OF DISPOSAL: Surplus

OTHER INFORMATION: _____

CONDITION OF ASSET: fair

REASON FOR DISPOSITION: no longer needed

RECEIVED

FEB 24 2016

BOONE COUNTY AUDITOR

COUNTY / COURT IT DEPT. (check one) DOES / DOES NOT (check one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: 1221

SIGNATURE Dodie Lee

AUDITOR ORIGINAL PURCHASE DATE NO DATA

RECEIPT INTO 1190-3836 HA

ORIGINAL COST _____

GRANT FUNDED (Y/N) _____

ORIGINAL FUNDING SOURCE _____

GRANT NAME _____

% FUNDING _____

AGENCY _____

ASSET GROUP _____

DOCUMENTATION ATTACHED (Y/N) _____

TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE _____ AUCTION _____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 191-2016

DATE APPROVED 4-21-16

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 2/24/16 FIXED ASSET TAG NUMBER: NA

DESCRIPTION: mailsorter for desk

REQUESTED MEANS OF DISPOSAL: surplus

OTHER INFORMATION: _____

CONDITION OF ASSET: fair

REASON FOR DISPOSITION: no longer needed

COUNTY / COURT IT DEPT. (check one) DOES / DOES NOT (check one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: 1221

SIGNATURE: [Signature]

AUDITOR

ORIGINAL PURCHASE DATE NO DATA

ORIGINAL COST _____

ORIGINAL FUNDING SOURCE _____

ASSET GROUP _____

RECEIPT INTO 1190-3836 HA

GRANT FUNDED (Y/N) _____

GRANT NAME _____

% FUNDING _____

AGENCY _____

DOCUMENTATION ATTACHED (Y/N) _____

TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE _____ AUCTION _____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 191-2016

DATE APPROVED 4-21-16

SIGNATURE [Signature]

RECEIVED

FEB 24 2016

BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 2/24/16

FIXED ASSET TAG NUMBER: #10086

DESCRIPTION: Cloth task chair

REQUESTED MEANS OF DISPOSAL:

OTHER INFORMATION: purchased 5/11/1995

CONDITION OF ASSET:

REASON FOR DISPOSITION: Replacement.

RECEIVED

FEB 24 2016

BOONE COUNTY AUDITOR

COUNTY / COURT IT DEPT. (circle one) DOES /DOES NOT (circle one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

LOCATION OF ASSET AND DESIRED DATE FOR ASSET REMOVAL TO STORAGE: in IT programming area.

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: IT 1170

SIGNATURE: Betsy Ruckemeier

AUDITOR

ORIGINAL PURCHASE DATE 5-11-95

RECEIPT INTO 1190-3836 HA

ORIGINAL COST 301.76

GRANT FUNDED (Y/N) N

ORIGINAL FUNDING SOURCE 2782

GRANT NAME _____

% FUNDING _____

AGENCY _____

ASSET GROUP 1602

DOCUMENTATION ATTACHED (Y/N) _____

TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

___ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

___ TRADE ___ AUCTION ___ SEALED BIDS

___ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 191-2016

DATE APPROVED 4-21-16

SIGNATURE *[Signature]*

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 2/25/16

FIXED ASSET TAG NUMBER: 08965

DESCRIPTION: Meridian phone Model NT4X35

REQUESTED MEANS OF DISPOSAL: surplus

OTHER INFORMATION:

CONDITION OF ASSET: fair

REASON FOR DISPOSITION: Purchased new

COUNTY / COURT IT DEPT. (circle one) DOES /DOES NOT (circle one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

LOCATION OF ASSET AND DESIRED DATE FOR ASSET REMOVAL TO STORAGE:

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO

IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: 6100 Fm

SIGNATURE: Jody M...

AUDITOR

ORIGINAL PURCHASE DATE 2-8-95

RECEIPT INTO 1190-3836 *HA*

ORIGINAL COST \$191.73

GRANT FUNDED (Y/N) N

ORIGINAL FUNDING SOURCE 2784

GRANT NAME _____

% FUNDING _____

ASSET GROUP 1604

AGENCY _____

DOCUMENTATION ATTACHED (Y/N) _____

TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE ____ AUCTION ____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 191-2016

DATE APPROVED 4-21-16

SIGNATURE: *[Signature]*

RECEIVED

FEB 26 2016

BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 2/26 FIXED ASSET TAG NUMBER: none
 DESCRIPTION: Cell phones: Iphone 4, Motorola android, Samsung Rugby, Nokia, Pantech flip phone, LG slider phone
 REQUESTED MEANS OF DISPOSAL: Surplus

RECEIVED

FEB 26 2016

BOONE COUNTY AUDITOR

OTHER INFORMATION:

CONDITION OF ASSET: poor to fair

REASON FOR DISPOSITION: upgraded to smartphones

COUNTY / COURT IT DEPT. (circle one) DOES /DOES NOT (circle one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

LOCATION OF ASSET AND DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: 6100 Fm SIGNATURE Jody Moore

AUDITOR No DATA
 ORIGINAL PURCHASE DATE _____ RECEIPT INTO 6100-3836 NR

ORIGINAL COST _____ GRANT FUNDED (Y/N) _____
 ORIGINAL FUNDING SOURCE _____ GRANT NAME _____
 _____ % FUNDING _____
 _____ AGENCY _____
 _____ DOCUMENTATION ATTACHED (Y/N) _____
 ASSET GROUP _____ TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:
 _____ TRANSFER DEPARTMENT NAME _____ NUMBER _____
 _____ LOCATION WITHIN DEPARTMENT _____
 _____ INDIVIDUAL _____
 _____ TRADE _____ AUCTION _____ SEALED BIDS _____
 _____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 191-2016
 DATE APPROVED 4-21-16
 SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 2/25/16 FIXED ASSET TAG NUMBER: none

DESCRIPTION: Meridian Phone

RECEIVED

REQUESTED MEANS OF DISPOSAL: surplus

FEB 26 2016

OTHER INFORMATION:

BOONE COUNTY AUDITOR

CONDITION OF ASSET: msg waiting does not work

REASON FOR DISPOSITION:

COUNTY / COURT IT DEPT. (circle one) DOES /DOES NOT (circle one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

LOCATION OF ASSET AND DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: Le100 - Fm SIGNATURE Jody Moore

AUDITOR

ORIGINAL PURCHASE DATE NO DATA

RECEIPT INTO 6100-3836 HA

ORIGINAL COST _____

GRANT FUNDED (Y/N) _____

ORIGINAL FUNDING SOURCE _____

GRANT NAME _____

% FUNDING _____

AGENCY _____

ASSET GROUP _____

DOCUMENTATION ATTACHED (Y/N) _____

TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE ____ AUCTION ____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 191-2016

DATE APPROVED 4-21-16

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE : 032816

FIXED ASSET TAG NUMBER: 18127

DESCRIPTION: Berkel 10' meat slicer

REQUESTED MEANS OF DISPOSAL: surplus

OTHER INFORMATION:

CONDITION OF ASSET: The bearings are out.

REASON FOR DISPOSITION: It has been replaced.

COUNTY / COURT IT DEPT. (check one) DOES / DOES NOT (check one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: 03/28/16

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: Sheriff-Jail 1255

SIGNATURE Capt. Jimmy Brown #157

AUDITOR

ORIGINAL PURCHASE DATE 10-03-12

RECEIPT INTO 1190-3836 HQ

ORIGINAL COST \$1,215.71

GRANT FUNDED (Y/N) N

ORIGINAL FUNDING SOURCE 2731

GRANT NAME _____

% FUNDING _____

AGENCY _____

ASSET GROUP 1604

DOCUMENTATION ATTACHED (Y/N) _____

TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE _____ AUCTION _____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 191-2016

DATE APPROVED 4-21-16

SIGNATURE [Signature]

RECEIVED

MAR 28 2016

BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE : March 29, 2016

FIXED ASSET TAG NUMBER: 10702

DESCRIPTION: 1996 Easy Lawn Straw Blower

REQUESTED MEANS OF DISPOSAL: Sell

OTHER INFORMATION: Serial Number: 20801; Model: SB228

CONDITION OF ASSET: Fair

REASON FOR DISPOSITION: Equipment is planned for replacement in 2016.

COUNTY / COURT IT DEPT. (circle one) DOES /DOES NOT (circle one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: None

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO

IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: 2040

SIGNATURE



RECEIVED

MAR 30 2016

BOONE COUNTY AUDITOR

AUDITOR

ORIGINAL PURCHASE DATE 8-1-96

RECEIPT INTO 2040-3835 HA

ORIGINAL COST \$7,813

GRANT FUNDED (Y/N) N

ORIGINAL FUNDING SOURCE 2741

GRANT NAME _____

ASSET GROUP 1604

% FUNDING _____

AGENCY _____

DOCUMENTATION ATTACHED (Y/N) _____

TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

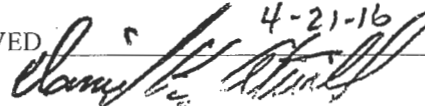
INDIVIDUAL _____

____ TRADE _____ AUCTION _____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 191-2016

DATE APPROVED 4-21-16

SIGNATURE 

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE : March 29, 2016

FIXED ASSET TAG NUMBER: 9602

DESCRIPTION: 1995 Stone Tamper Compactor

REQUESTED MEANS OF DISPOSAL: Sell

OTHER INFORMATION: Serial Number: 1951069; Model: SM-832R

CONDITION OF ASSET: Fair

REASON FOR DISPOSITION: Equipment is planned for replacement in 2016.

COUNTY / COURT IT DEPT. (circle one) DOES /DOES NOT (circle one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: None

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO

IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: 2040

SIGNATURE



AUDITOR

ORIGINAL PURCHASE DATE 6-20-95

RECEIPT INTO 2040-3836 HA

ORIGINAL COST \$2,790.00

GRANT FUNDED (Y/N) N

ORIGINAL FUNDING SOURCE 2741

GRANT NAME _____

% FUNDING _____

ASSET GROUP 1604

AGENCY _____

DOCUMENTATION ATTACHED (Y/N) _____

TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE _____ AUCTION _____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 191-2016

DATE APPROVED 4-21-16

SIGNATURE 

RECEIVED
MAR 30 2016
BOONE COUNTY AUDITOR

CERTIFIED COPY OF ORDER

STATE OF MISSOURI }
County of Boone } ea.

April Session of the April Adjourned

Term. 20 16

In the County Commission of said county, on the 21st day of April 20 16

the following, among other proceedings, were had, viz:

Now on this day the County Commission of the County of Boone does hereby approve the request by the Purchasing Department to dispose of the attached list of surplus PC & Peripheral equipment through MRC Recycling Center.

It is further ordered the Presiding Commissioner is hereby authorized to sign said Request for Disposal forms.

Done this 21st day of April, 2016

ATTEST:

Wendy S. Noren
Wendy S. Noren
Clerk of the County Commission

Daniel K. Atwill
Daniel K. Atwill
Presiding Commissioner

Karen M. Miller
Karen M. Miller
District I Commissioner

Janet M. Thompson
Janet M. Thompson
District II Commissioner

Boone County Purchasing
David Eagle
Purchasing Assistant



613 E. Ash St.
Columbia, MO 65201
Phone: (573) 886-4394

MEMORANDUM

TO: Boone County Commission
FROM: David Eagle
RE: Computer and Peripheral Surplus Disposal
DATE: April 11, 2016

The Purchasing Departments requests permission to dispose of the following list of surplus PC & Peripheral equipment through MRC Recycling Center. MRC Recycling will pick up our surplus at no charge. They are a State of Missouri, DNR Level Four recycling center. No computer items are land-filled. Purchasing will obtain a Certificate of Destruction, and we will let them know that we want everything recycled, not reused so nothing ends up in the landfill.

Prior to Computer surplus coming to Purchasing for disposal, Information Technology has removed the hard-drives for destruction by their department. Their procedure for PC disposal is:

Once all the data is copied or recovered for the user, IT removes the hard drive and memory from the PC. The memory is held to be used for upgrading other PCs at the county that can benefit. IT sometimes removes parts that can be used as spare if the model is current enough. (ie Power Supplies, Video Cards, etc.) The hard drive is held for a minimum of 30 days in case a user identifies something is missing. After 30 days IT may reuse the hard drive in other county PCs if there are failures. If a hard drive goes unused or fails and IT needs to physically dispose of it, they drill a 5/8" hole through the drive and the data platters. Once IT has collection of "drilled" drives, they deliver them to PC recycling vendor, MRC Recycling Center.

MRC Recycling Center certifies that they have picked up the following items and that all items will be recycled, not reused, so nothing ends up in the landfill.

Signature: _____

Date: _____

	Asset #	Description	Make & Model	Department	Condition of Asset	Serial #
1.	15401	LASER MONOCHROME PRINTER	LEXMARK T630N	COLLECTOR	UNKNOWN	
2.	14193	LASER MONOCHROME PRINTER	LEXMARK T630N	COLLECTOR	UNKNOWN	
3.	14194	LASER MONOCHROME PRINTER	LEXMARK T630N	COLLECTOR	UNKNOWN	

4.	15581	LASER MONOCHROME PRINTER	LEXMARK T430DN	PROSECUTING ATTORNEY	UNKNOWN	
5.	13474	LASER MONOCHROME PRINTER	LEXMARK T630N	HUMAN RESOURCES	UNKNOWN	
6.	11973	LASER MONOCHROME PRINTER	HP LASERJET 4050N	PROSECUTING ATTORNEY	UNKNOWN	
7.	14839	17" LCD MONITOR	HP L1740	AUDITOR	UNKNOWN	
8.	15924	17" LCD MONITOR	HP L1740	AUDITOR	UNKNOWN	
9.	18129	19" LCD MONITOR	HP LE1911	HUMAN RESOURCES	UNKNOWN	
10.	14892	17" LCD MONITOR	HP L1740	SHERIFF	UNKNOWN	
11.	15031	17" LCD MONITOR	HP L1740	PLANNING & ZONING	UNKNOWN	
12.	16093	17" LCD MONITOR	HP L1740	HUMAN RESOURCES	UNKNOWN	
13.	16159	17" LCD MONITOR	HP L1740	PURCHASING	UNKNOWN	
14.	18687	17" LCD MONITOR	DELL E1713S	HUMAN RESOURCES	UNKNOWN	
15.	18554	19" LCD MONITOR	PLANAR PT191MU	SHERIFF	UNKNOWN	
16.	18560	19" LCD MONITOR	NEC LCD195VX+	PLANNING & ZONING	UNKNOWN	
17.	15604	17" LCD MONITOR	HP L1740	SHERIFF	UNKNOWN	
18.	18590	LASER MONOCHROME PRINTER	IBM INFOPRINT 1585N	I.T.	UNKNOWN	

cc: Heather Acton, Auditor
Surplus File

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 11/09/2015

FIXED ASSET TAG NUMBER: 00015401

DESCRIPTION: LEXMARK T630N
PRINTER LASER MONOCHROME

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: PURCHASED OCT 2003

REASON FOR DISPOSITION: REPLACEMENT

COUNTY/COURT IT DEPT. (circle one) ~~DOES~~/DOES NOT (circle one) ~~WISH~~ TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP - In GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES ~~NO~~
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: COLLECTOR 1150 SIGNATURE: Judy

AUDITOR

ORIGINAL PURCHASE DATE 11-30-06
ORIGINAL COST 2,088.18
ORIGINAL FUNDING SOURCE 2731
ASSET GROUP 1603

RECEIPT INTO 11903836 HA
TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE ____ AUCTION ____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 192-2016

DATE APPROVED 4-21-16

SIGNATURE [Signature]

RECEIVED

MAR 10 2016

BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 11/04/2015

FIXED ASSET TAG NUMBER: 00014193

DESCRIPTION: LEXMARK T630N
PRINTER LASER MONOCHROME

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: PURCHASED OCT 2003

REASON FOR DISPOSITION: REPLACEMENT

COUNTY/COURT IT DEPT. (circle one) DOES/DOES NOT (circle one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP - In GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: COLLECTOR SIGNATURE: *Judy*

AUDITOR

ORIGINAL PURCHASE DATE 10-23-03
ORIGINAL COST \$2,088.18
ORIGINAL FUNDING SOURCE 2751
ASSET GROUP 1603

RECEIPT INTO 1190-3836 Ha
TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE ____ AUCTION ____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 192-2016

DATE APPROVED 4-21-16

SIGNATURE *Daniel H. Atwell*

RECEIVED

MAR 10 2016

BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 11/04/2015

FIXED ASSET TAG NUMBER: 00014194

DESCRIPTION: LEXMARK T630N
PRINTER LASER MONOCHROME

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: PURCHASED OCT 2003

REASON FOR DISPOSITION: REPLACEMENT

~~COUNTY/COURT~~ IT DEPT. (circle one) DOES/DOES NOT (circle one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP - In GC Room 123

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: COLLECTOR SIGNATURE: Judy

AUDITOR

ORIGINAL PURCHASE DATE 10-23-03
ORIGINAL COST 2,088.18
ORIGINAL FUNDING SOURCE 2731
ASSET GROUP 1603

RECEIPT INTO 1190-3836 HA
TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE ____ AUCTION ____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 192-2016

DATE APPROVED 4-21-16

SIGNATURE Samy H. Atwell

RECEIVED

MAR 10 2016

BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 03/02/2016

FIXED ASSET TAG NUMBER: 00015581

DESCRIPTION: LEXMARK T430DN
PRINTER LASER MONOCHROME

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: PURCHASED 2006 - POOR

REASON FOR DISPOSITION: REPLACEMENT

COUNTY/COURT IT DEPT. (circle one) DOES/DOES NOT (circle one) ~~WISH TO TRANSFER THIS ITEM FOR ITS OWN USE~~ (this item is applicable to computer equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP - In GC Room 123.

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PROSECUTING ATTORNEY SIGNATURE: 

AUDITOR

ORIGINAL PURCHASE DATE 8-22-06
ORIGINAL COST \$1,040.84
ORIGINAL FUNDING SOURCE 2731
ASSET GROUP 1603

RECEIPT INTO 1190-3836 HA
TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE ____ AUCTION ____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 192-2016

DATE APPROVED 4-21-16

SIGNATURE 

RECEIVED

MAR 03 2016

BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 03/02/2016

FIXED ASSET TAG NUMBER: 00013474

DESCRIPTION: LEXMARK T520N
PRINTER LASER MONOCHROME

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: PURCHASED 2002 - POOR

REASON FOR DISPOSITION: REPLACEMENT

COUNTY/COURT DEPT. (circle one) DOES/DOES NOT (circle one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP - In GC Room 123.

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: HUMAN RESOURCES 1115 SIGNATURE: 

AUDITOR

ORIGINAL PURCHASE DATE 11-20-02
ORIGINAL COST \$1,214.18
ORIGINAL FUNDING SOURCE 2731
ASSET GROUP 1603

RECEIPT INTO 1190-3836 HA
TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE ____ AUCTION ____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 192-2016

DATE APPROVED 4-21-16

SIGNATURE 

RECEIVED

MAR 03 2016

BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 03/02/2016

FIXED ASSET TAG NUMBER: 00011973

DESCRIPTION: HP LASERJET 4050N
PRINTER LASER MONOCHROME

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: PURCHASED 1999 - POOR

REASON FOR DISPOSITION: REPLACEMENT

RECEIVED

MAR 03 2016

BOONE COUNTY AUDITOR

COUNTY/COURT IT DEPT. (circle one) DOES/DOES NOT (circle one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP - In GC Room 123.

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PROSECUTING ATTORNI SIGNATURE: Judy

AUDITOR

ORIGINAL PURCHASE DATE 10-28-99
ORIGINAL COST \$ 1822.14
ORIGINAL FUNDING SOURCE 2731
ASSET GROUP 1603

RECEIPT INTO 1190-3836 HR
TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE _____ AUCTION _____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 192-2016

DATE APPROVED 4-21-16

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 03/21/2016

FIXED ASSET TAG NUMBER: 00014839

DESCRIPTION: HP L1740
MONITOR LCD 17 INCH

REQUESTED MEANS OF DISPOSAL: _____

RECEIVED

OTHER INFORMATION: _____

MAR 22 2016

CONDITION OF ASSET: PURCHASED 2005 - POOR

BOONE COUNTY AUDITOR

REASON FOR DISPOSITION: REPLACEMENT

COUNTY/COURT IT DEPT. (circle one) ~~DOES~~/DOES NOT (circle one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP - In GC Room 123.

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: AUDITOR - 1110 SIGNATURE: Judy

AUDITOR

ORIGINAL PURCHASE DATE 3-16-05
ORIGINAL COST 337.00
ORIGINAL FUNDING SOURCE 2731
ASSET GROUP 1603

RECEIPT INTO 1190-3836 HA
TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE ____ AUCTION ____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 192-2016

DATE APPROVED 4-21-16

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 03/21/2016

FIXED ASSET TAG NUMBER: 00015924

DESCRIPTION: HP L1740
MONITOR LCD 17 INCH

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: PURCHASED 2007 - POOR

REASON FOR DISPOSITION: REPLACEMENT

COUNTY/COURT IT DEPT. (circle one) DOES/DOES NOT (circle one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP - In GC Room 123.

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: AUDITOR - 1110 SIGNATURE: Judy

AUDITOR

ORIGINAL PURCHASE DATE 3-9-07
ORIGINAL COST 188.00
ORIGINAL FUNDING SOURCE 2731
ASSET GROUP 1603

RECEIPT INTO 1190-3836 HA
TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE ____ AUCTION ____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 192-2016

DATE APPROVED 4-21-16

SIGNATURE [Signature]

RECEIVED
MAR 22 2016
BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 03/21/2016

FIXED ASSET TAG NUMBER: 00018129

DESCRIPTION: HP LE1911
MONITOR LCD 19 INCH

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: POOR - HORIZONTAL LINES

REASON FOR DISPOSITION: REPLACEMENT

RECEIVED


MAR 22 2016

BOONE COUNTY AUDITOR

COUNTY/COURT IT DEPT. (circle one) DOES/DOES NOT (circle one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to ~~computer equipment~~ only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP - In GC Room 123.

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: HUMAN RESOURCES 1115 SIGNATURE: 

AUDITOR

ORIGINAL PURCHASE DATE 9-25-12
ORIGINAL COST 123.40
ORIGINAL FUNDING SOURCE 2731
ASSET GROUP 1603

RECEIPT INTO 1190-3836 HEL
TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE ____ AUCTION ____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 192-2016

DATE APPROVED 4-21-16

SIGNATURE 

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 03/18/2016

FIXED ASSET TAG NUMBER: 00014892

DESCRIPTION: HP L1740
MONITOR LCD 17 INCH

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: PURCHASED 2005 - POOR

REASON FOR DISPOSITION: REPLACEMENT

COUNTY/COURT IT DEPT. (circle one) DOES/DOES NOT (circle one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP In GC Room 123.

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: SHERIFF 1251 SIGNATURE: *Judy*

AUDITOR

ORIGINAL PURCHASE DATE 4-20-05
ORIGINAL COST 319.00
ORIGINAL FUNDING SOURCE 2731
ASSET GROUP 1603

RECEIPT INTO 1190-3836 NA
TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE ____ AUCTION ____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 192-2016

DATE APPROVED 4-21-16

SIGNATURE *Dennis H. Atwell*

RECEIVED
MAR 21 2016
BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 03/18/2016

FIXED ASSET TAG NUMBER: 00015031

DESCRIPTION: HP L1740
MONITOR LCD 17 INCH

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: PURCHASED 2005 - POOR

REASON FOR DISPOSITION: REPLACEMENT

COUNTY/COURT IT DEPT. (circle one) DOES/DOES NOT (circle one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP In GC Room 123.

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PLANNING & ZONING ¹⁷¹⁰ SIGNATURE: 

AUDITOR

ORIGINAL PURCHASE DATE 6-15-05
ORIGINAL COST 319.00
ORIGINAL FUNDING SOURCE 2731
ASSET GROUP 1603

RECEIPT INTO 1190-3836 NA
TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE _____ AUCTION _____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 192-2016

DATE APPROVED 4-21-16

SIGNATURE 

RECEIVED
MAR 21 2016
BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 03/18/2016

FIXED ASSET TAG NUMBER: 00016093

DESCRIPTION: HP L1740
MONITOR LCD 17 INCH

RECEIVED

REQUESTED MEANS OF DISPOSAL: _____

MAR 21 2016

OTHER INFORMATION: _____

CONDITION OF ASSET: PURCHASED IN 2007 - POOR

BOONE COUNTY AUDITOR

REASON FOR DISPOSITION: REPLACEMENT

COUNTY/COURT IT DEPT. (circle one) DOES/DOES NOT (circle one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP - In GC Room 123.

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: HUMAN RESOURCES 1115 SIGNATURE: Judy

AUDITOR

ORIGINAL PURCHASE DATE 4-6-07
ORIGINAL COST \$188.00
ORIGINAL FUNDING SOURCE 2731
ASSET GROUP 1603

RECEIPT INTO 1190-3836 APL

TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

___ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

___ TRADE ___ AUCTION ___ SEALED BIDS

___ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 192-2016

DATE APPROVED 4-21-16

SIGNATURE Dorothy A. Atwell

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 03/18/2016

FIXED ASSET TAG NUMBER: 00016159

DESCRIPTION: HP L1740
MONITOR LCD 17 INCH

RECEIVED

REQUESTED MEANS OF DISPOSAL: _____

MAR 21 2016

OTHER INFORMATION: _____

BOONE COUNTY AUDITOR

CONDITION OF ASSET: VERY POOR

REASON FOR DISPOSITION: REPLACEMENT

COUNTY/COURT IT DEPT. (circle one) DOES/DOES NOT (circle one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP In GC Room 123.

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PURCHASING 1118 SIGNATURE: *Judy*

AUDITOR

ORIGINAL PURCHASE DATE 4-12-07
ORIGINAL COST 188.00
ORIGINAL FUNDING SOURCE 2731
ASSET GROUP 1603

RECEIPT INTO 1190-3836 HA
TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE _____ AUCTION _____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 192-2016

DATE APPROVED 4-21-16

SIGNATURE *Samy B. Atwell*

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 03/18/2016

FIXED ASSET TAG NUMBER: 00018687

DESCRIPTION: DELL E1713S
MONITOR LCD 17 INCH

RECEIVED

MAR 21 2016

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

BOONE COUNTY AUDITOR

CONDITION OF ASSET: VERY POOR

REASON FOR DISPOSITION: REPLACEMENT

COUNTY/COURT IT DEPT. (circle one) DOES/DOES NOT (circle one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP In GC Room 123.

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: HUMAN RESOURCES ¹¹¹⁵ SIGNATURE: Judy J.

AUDITOR

ORIGINAL PURCHASE DATE 12-19-13
ORIGINAL COST 1.00
ORIGINAL FUNDING SOURCE 2787
ASSET GROUP 1603

RECEIPT INTO 2901-3836 NA
TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE ____ AUCTION ____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 192-2016

DATE APPROVED 4-21-16

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 03/18/2016

FIXED ASSET TAG NUMBER: 00018554

DESCRIPTION: PLANAR PT191MU
MONITOR LCD 19 INCH

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: VERY POOR

REASON FOR DISPOSITION: REPLACEMENT

COUNTY/COURT IT DEPT. (circle one) ~~DOES~~/DOES NOT (circle one) ~~WISH TO TRANSFER~~ THIS ITEM FOR ITS OWN USE (this item is applicable to ~~computer~~ equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP - In GC Room 123.

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: SHERIFF 1251 SIGNATURE: *Judy*

AUDITOR

ORIGINAL PURCHASE DATE 2-1-14
ORIGINAL COST 1.00
ORIGINAL FUNDING SOURCE 2731
ASSET GROUP 1603

RECEIPT INTO 1190-3836 HA
TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE ____ AUCTION ____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 192-2016

DATE APPROVED 4-21-16

SIGNATURE *[Signature]*

RECEIVED

MAR 21 2016

BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 03/18/2016

FIXED ASSET TAG NUMBER: 00018560

DESCRIPTION: NEC LCD195VX+
MONITOR LCD 19 INCH

RECEIVED

REQUESTED MEANS OF DISPOSAL: _____

MAR 21 2016

OTHER INFORMATION: _____

CONDITION OF ASSET: VERY POOR

BOONE COUNTY AUDITOR

REASON FOR DISPOSITION: REPLACEMENT

COUNTY/COURT IT DEPT. (circle one) DOES/DOES NOT (circle one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP - In GC Room 123.

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: PLANNING & ZONING¹⁷¹⁰ SIGNATURE: Judy

AUDITOR

ORIGINAL PURCHASE DATE 2-1-14
ORIGINAL COST 1000
ORIGINAL FUNDING SOURCE 2731
ASSET GROUP 1603

RECEIPT INTO 1190-3836 HA
TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE ____ AUCTION ____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 192-2016

DATE APPROVED 4-21-16

SIGNATURE [Signature]

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 03/22/2016

FIXED ASSET TAG NUMBER: 00015604

DESCRIPTION: HP L1740
MONITOR LCD 17 INCH

REQUESTED MEANS OF DISPOSAL: _____

OTHER INFORMATION: _____

CONDITION OF ASSET: VERY POOR

REASON FOR DISPOSITION: REPLACEMENT

COUNTY/COURT IT DEPT. (circle one) DOES/DOES NOT (circle one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: ASAP In GC Room 123.

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: SHERIFF 1251 SIGNATURE: Judy

AUDITOR

ORIGINAL PURCHASE DATE 8-24-06
ORIGINAL COST \$227.00
ORIGINAL FUNDING SOURCE 2.731
ASSET GROUP 1.603

RECEIPT INTO 1190-3836 HA
TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE ____ AUCTION ____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 192-2016

DATE APPROVED 4-21-2016

SIGNATURE [Signature]

RECEIVED

MAR 28 2016

BOONE COUNTY AUDITOR

BOONE COUNTY

REQUEST FOR DISPOSAL/TRANSFER OF COUNTY PROPERTY

DATE: 09/02/2015

FIXED ASSET TAG NUMBER: 00018590

DESCRIPTION: IBM INFOPRINT 1585N
PRINTER LASER MONOCHROME

RECEIVED

REQUESTED MEANS OF DISPOSAL: _____

SEP 02 2015

OTHER INFORMATION: _____

BOONE COUNTY AUDITOR

CONDITION OF ASSET: ~~GOOD~~ _____

REASON FOR DISPOSITION: REPLACEMENT

COUNTY/COURT IT DEPT. (circle one) DOES/DOES NOT (circle one) WISH TO TRANSFER THIS ITEM FOR ITS OWN USE (this item is applicable to computer equipment only)

DESIRED DATE FOR ASSET REMOVAL TO STORAGE: _____

WAS ASSET PURCHASED WITH GRANT FUNDING? YES NO
IF YES, ATTACH DOCUMENTATION SHOWING FUNDING AGENCY'S PERMISSION TO DISPOSE OF ASSET.

DEPARTMENT: INFORMATION TECHNOL SIGNATURE: Judy

AUDITOR

ORIGINAL PURCHASE DATE 7-31-07
ORIGINAL COST \$11,996.40
ORIGINAL FUNDING SOURCE 2743
ASSET GROUP 1603

RECEIPT INTO 2010-3835 Ha
TRANSFER CONFIRMED _____

COUNTY COMMISSION / COUNTY CLERK

APPROVED DISPOSAL METHOD:

____ TRANSFER DEPARTMENT NAME _____ NUMBER _____

LOCATION WITHIN DEPARTMENT _____

INDIVIDUAL _____

____ TRADE AUCTION ____ SEALED BIDS

____ OTHER EXPLAIN _____

COMMISSION ORDER NUMBER 431-2015 } 192-2016
DATE APPROVED 9-17-15 } 4-21-2016
SIGNATURE David [Signature]

CERTIFIED COPY OF ORDER

STATE OF MISSOURI

} ea.

April Session of the April Adjourned

Term. 20 16

County of Boone

In the County Commission of said county, on the

21st

day of

April

20 16

the following, among other proceedings, were had, viz:

Now on this day the County Commission of the County of Boone does hereby approve the request by the Prosecuting Attorney's Office to hire above flexible hiring maximum for Nicholas Komoroski at 91.7% of Mid-Point.

It is further ordered the Boone County Commissioners are hereby authorized to sign said Request to Hire Above Flexible Hiring Maximum form.

Done this 21st day of April, 2016

ATTEST:

Wendy S. Noren
Wendy S. Noren
Clerk of the County Commission

Daniel K. Atwill
Presiding Commissioner

Karen M. Miller
District I Commissioner

Janet M. Thompson
District II Commissioner

REQUEST TO HIRE ABOVE FLEXIBLE HIRING MAXIMUM BOONE COUNTY

Description of form: To request approval to hire between 86% - 120% of the salary range mid-point

Procedure:

1. The Administrative Authority or designee completes the form and prepares a schedule that demonstrates that funding is available within the salary and wage appropriation (account #10100) and calculates the amount for a budget revision, if needed. The Administrative Authority submits the form, the schedule, and the budget revision (if needed) to the Auditor for certification of funds availability.
2. The Auditor certifies funds availability and approves budget revision (if applicable) and forwards to Human Resource Director.
3. The Human Resource Director reviews the information, makes recommendation, and schedules the request on the Commission agenda for approval.
4. The County Commission will review all requests for a starting salary above the mid-point and will either approve or deny the request. After approval/denial, the County Commission will return this form to the Administrative Authority.
5. The Administrative Authority will attach a copy of this approved form to the Personnel Action Form.

Name of prospective employee Nicholas Komoroski Department Prosecuting Attorney

Position Title Assistant Prosecuting Attorney II Position No. 175

Proposed Starting Salary (complete one only) Annual: \$65,499.20 % of Mid-Point 91.7
 OR Hourly: _____ % of Mid-Point _____

No. of employees in this job classification within your Department? 12

Justification (Describe the prospective employee's education and/or work experience which supports this proposed compensation level)

Nick graduated from the University of Missouri School of Law in 2003. He has worked in the Litigation Division of the Missouri Attorney General's Office since 2014, and was a Senior Litigation Associate for 10 years with Hazelwood & Weber law from 2004 - 2014.

If proposed salary exceeds what other employees in the same job classification are paid, explain how the prospective employee's background exceeds others working in the same job classification:

We are requesting the same salary as three of our current assistant prosecuting attorneys with similar or less experience.

What effect, if any, will this proposal have on salary relationships with other positions in your office and/or positions in other offices?

This proposal should not have any negative effect.

Additional comments:

There will be no negative budgetary impact because the new hire will be \$4,513.60 less than the former employee.

Administrative Authority's Signature: Daniel L. Knight Date: 4-15-16

Auditor's Certification: Funds are available within the existing departmental salary and wage appropriation (#10100).
 Funds are not available within the existing departmental salary and wage appropriation (#10100); budget revision required to provide funding is attached.

Auditor's Signature: June E. Pitchford by ay Date: 4/18/16

Human Resource Director's Recommendations:

Does not appear to cause any internal equity problems. Candidate has 12 years experience and is not entry level. approve

Human Resource Director's Signature: Debbie Date: 4/18/16

County Commission _____ Approve _____ Deny _____
 Comment(s): _____

Presiding Commissioner's Signature: [Signature] Date: 4-21-16

District I Commissioner's Signature: [Signature] Date: 4/21/16

District II Commissioner's Signature: [Signature] Date: 4/21/16

CERTIFIED COPY OF ORDER

STATE OF MISSOURI }
County of Boone } ea.

April Session of the April Adjourned

Term. 20 16

In the County Commission of said county, on the 21st day of April 20 16
the following, among other proceedings, were had, viz:

Now on this day the County Commission of the County of Boone does hereby adopt the attached Parking Tow Policy and Requirements.

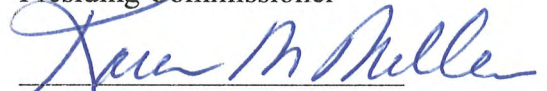
Done this 21st day of April, 2016

ATTEST:

Wendy S. Noren
Wendy S. Noren
Clerk of the County Commission



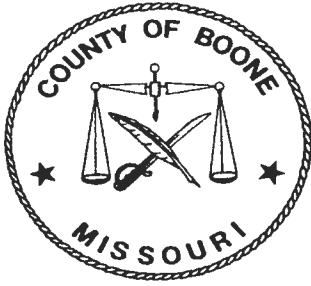
Daniel K. Atwill
Presiding Commissioner



Karen M. Miller
District I Commissioner



Janet M. Thompson
District II Commissioner



CHARLES J. DYKHOUSE
BOONE COUNTY COUNSELOR
801 E. WALNUT, SUITE 211
COLUMBIA, MISSOURI 65201
TELEPHONE (573) 886-4414
FAX (573) 886-4413

PARKING TOW POLICY AND REQUIREMENTS
(updated 4-15-2016)

Under the authority provided in RSMo §304.155, in order to make the parking tow policy the easiest to implement and facilitate effective communications with the Columbia Police Department regarding towed vehicles, the following tow policies are suggested:

1. Sign Requirements – In plain view at all entrances to the parking lot that will be subject to the tow policy, a sign not less than seventeen by twenty-two inches (17"x22") in size, with lettering of not less than one inch (1") in height, stating *substantially* the following:

Private Lot
Permit Parking Only
All Others Towed At Owner's Expense
Max Fee: \$140/tow; \$50/day storage
For information on towed vehicles: 442-6131
Boone County
Parking Ord #1.7.2.1

It should be noted that the phone number is the non-emergency number for the Columbia Police Department, which is the local traffic law enforcement agency where information will be available regarding vehicles towed under this policy.

2. Tow Agencies – The following two (2) agencies have a past relationship with the County and can be contacted directly to tow a car parked without a valid Boone County permit.

- a). AJ's Towing, 814-1842
- b). Tiger Towing, 449-3754

3. Documentation Requirements – Employee authorizing the tow must complete the Missouri Department of Revenue Form 4669, **Abandoned Property Report, Section A and the name of the Towing Company called in Section B.** The "reason" will always be "Reason #1" which is parking in violation of a sign that meets the statutory requirements. I recommend that the location of abandoned property to be towed state "Boone County Lot" and then the physical address of the lot. When complete, the form will be delivered to the tow truck operator for further completion and notification of CPD. **A copy of the form with a completed Section A and the name of the Towing Company filled out in Section B should be made.** The County's copy of the form should be maintained for at least five (5) years in the Facilities Maintenance office for a record of the tow, the towing company contacted and the employee who authorized the tow.



MISSOURI DEPARTMENT OF REVENUE
 MOTOR VEHICLE BUREAU
 PO BOX 2076, JEFFERSON CITY MO 65105-2076
 (573) 751-4509 www.dor.mo.gov/mvdl

ABANDONED PROPERTY REPORT

(For tows from private property **NOT** authorized by law enforcement.)

FORM
4669
 (REV. 7-2009)

SECTION A — PRIVATE PROPERTY OWNER, LESSEE, PROPERTY SECURITY MANAGER MUST COMPLETE	I AUTHORIZE THE VEHICLE TO BE TOWED BASED ON THE REASON INDICATED BELOW.						
	CHECK A REASON:						
	<input type="checkbox"/> 1. A SIGN NOT LESS THAN 17 X 22 INCHES IN SIZE CONTAINING LETTERING NOT LESS THAN ONE INCH IN HEIGHT IS DISPLAYED WITHIN PLAIN VIEW PROHIBITING PUBLIC PARKING. I WILL NOTIFY THE LAW ENFORCEMENT AGENCY WITHIN 1 HOUR OF THE TOW.						
	<input type="checkbox"/> 2. THE ABANDONED PROPERTY WAS LEFT UNATTENDED ON OWNER-OCCUPIED RESIDENTIAL PROPERTY WITH FOUR UNITS OR LESS. I HAVE NOTIFIED THE _____ LAW ENFORCEMENT AGENCY AND TEN HOURS HAVE ELAPSED SINCE THAT NOTIFICATION.						
	<input type="checkbox"/> 3. THE ABANDONED PROPERTY WAS LEFT UNATTENDED ON PRIVATE PROPERTY. I HAVE NOTIFIED THE _____ LAW ENFORCEMENT AGENCY AND NINETY-SIX HOURS HAVE ELAPSED SINCE THAT NOTIFICATION.						
	I CERTIFY THAT THE VEHICLE LISTED BELOW WAS ABANDONED ON PROPERTY OF WHICH I AM THE OWNER, LESSEE, OR PROPERTY/SECURITY MANAGER. I HAVE AUTHORIZED THE TOWING COMPANY LISTED BELOW TO REMOVE THE VEHICLE FROM MY PROPERTY AND WITNESSED THE REMOVAL OF THE VEHICLE. I FURTHER CERTIFY THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THIS IS A LEGAL DECLARATION SUBJECT TO CRIMINAL PENALTIES.						
	SIGNATURE OF OWNER, LESSEE, OR PROPERTY/SECURITY MANAGER			PRINTED NAME OF OWNER, LESSEE, OR PROPERTY/SECURITY MANAGER			
	TELEPHONE NUMBER OF OWNER, LESSEE, OR PROPERTY/SECURITY MANAGER			DATE OF TOW			
	LOCATION OF ABANDONED PROPERTY TO BE TOWED (STREET ADDRESS, CITY, STATE, AND ZIP CODE)						
	NAME AND ADDRESS OF THE ABANDONED PROPERTY & OR DRIVER OWNER, IF KNOWN						
NAME AND ADDRESS OF THE LIENHOLDER OF THE ABANDONED PROPERTY, IF KNOWN							
DESCRIPTION OF DAMAGE TO THE ABANDONED PROPERTY							
SECTION B — TOWING COMPANY MUST COMPLETE	YEAR	MAKE	MODEL	VEHICLE IDENTIFICATION NUMBER	MILEAGE	LICENSE PLATE NUMBER	STATE
	STORAGE LOCATION OF THE ABANDONED PROPERTY						
	LAW ENFORCEMENT AGENCY NOTIFIED (MUST BE SAME AGENCY IN SECTION A)				DATE NOTIFIED	TIME NOTIFIED	
	LAW ENFORCEMENT AGENCY ADDRESS			CITY	LAW ENFORCEMENT AGENCY TELEPHONE NUMBER		
	NAME OF TOWING COMPANY			TOWER HAS ONLINE ACCESS TO DOR RECORDS <input type="checkbox"/> YES <input type="checkbox"/> NO	TOWING COMPANY TELEPHONE NUMBER		
	ADDRESS OF TOWING COMPANY			CITY	STATE	ZIP CODE	
	NOTE: THIS REPORT MUST BE GIVEN TO THE LAW ENFORCEMENT AGENCY SHOWN ABOVE WITHIN 2 HOURS OF THE TOW IF REASON 1 IS CHECKED ABOVE OR WITHIN TWENTY-FOUR HOURS FOR ALL OTHER TOWS.						
	SIGNATURE OF TOWING OPERATOR				PRINTED NAME OF TOWING OPERATOR		
	LAW ENFORCEMENT AGENCY				DATE NOTIFIED OF TOW	DATE REPORT FILED	
	<input type="checkbox"/> NCIC (PROVIDE NUMBER) _____ <input type="checkbox"/> MULES <input type="checkbox"/> REJIS <input type="checkbox"/> ALERT <input type="checkbox"/> OTHER					INQUIRY DATE (MM/DD/YY)	
MSHP NUMBER				REPORT/CASE/INCIDENT/TOW NUMBER			
ABANDONED PROPERTY OWNER'S NAME		ADDRESS		CITY	STATE	ZIP CODE	
LIENHOLDER'S NAME		ADDRESS		CITY	STATE	ZIP CODE	
SIGNATURE OF OFFICER				PRINTED NAME OF OFFICER		BADGE	

ABANDONED PROPERTY REPORT (DOR-4669) INSTRUCTIONS

- Owner, lessee, or property/security manager completes and signs this form;
- Towing company completes, signs, and delivers this report to the law enforcement agency within 2 hours of the tow if reason 1 is checked on front or within twenty-four hours for all other tows;
- Law enforcement officer completes and signs this form and retains a copy for their files;
- Towing company sends the original DOR-4669 to the Missouri Department of Revenue (department) if property remains unclaimed after 10 days and the tow company **does not** have online access to department records;
- Towing company retains the pink copy of the DOR-4669 for three years;
- Towing company must notify the department in writing of any address change;
- Towing companies with online record access must check department records online for owner and lienholder information;
- If the towing company does not find owner or lienholder information using the online record check, the **towing company, within 10 days of the tow, must** send a copy of the completed "No Record" screen from the online record search and the DOR-4669 to the following address for further research:
**MOTOR VEHICLE BUREAU
RECORD CENTER
PO BOX 2048
JEFFERSON CITY MO 65105-2048**
- The department will perform a record search for the name and address of the owner and lienholder of record within five working days of receipt of the DOR-4669 submitted by tow company (no online access) or a completed "No Record" screen from the online record search and the DOR-4669 submitted by the towing company (with online access). A department search will be done by:
 - 1) Searching the department files; or
 - 2) Initiating an inquiry with another state if the evidence presented indicates the abandoned property was registered or titled in another state.
- The department will send a notification letter to the towing company within 15 working days after the search is completed with the following information:
 - 1) The name and address of the owner and lienholder; or
 - 2) Instructions if there is no record information available (please see below).
- Towing company must send a completed Vehicle Owner and Lienholder Notification (DOR-4577) by certified mail, return receipt requested within 10 days to the owner/lienholder as provided from the department records.

NO INFORMATION FOUND ON RECORD NOTIFICATION RECEIVED

If the department has no record of the abandoned property, the towing company must certify that a physical search of the abandoned property disclosed no other evidence of ownership. The towing company must also certify that a good faith effort was made to establish the prior state of registration and title by checking the items below:

- 1) The abandoned property for any type of license plates, license plate record, temporary permit, inspection sticker, decal, or other evidence that may indicate a state of possible registration and title;
- 2) The tow ticket/report of the tow operator to see if a license plate was on the abandoned property at the beginning of the tow, if a private tow; and
- 3) The tow ticket/report of the tow operator to see if any information is indicated for the Driver/Owner/Lienholder of the vehicle.

NOTE: The department will provide the tower with a notification letter to certify the above checks have been made. **This certification must accompany the application for title.**

HOW TO APPLY FOR ORIGINAL, SALVAGE, OR JUNK ABANDONED PROPERTY TITLES

Send **ALL** title applications on abandoned property to: **Department of Revenue, Central Branch, P.O. Box 2076, Jefferson City MO 65105**

Submit the following when applying for a title for an abandoned vehicle:

- 1) Application for title with appropriate fees, properly completed in the towing company's name. The title type must be marked "Original", "Salvage", or "Junking Certificate" (Tow company not required to pay title fee, sales tax or processing fees.);
- 2) Abandoned Property Affidavit (DOR-4576) properly completed, signed by the tower, and notarized by a notary public;
- 3) A copy of the Vehicle Owner and Lienholder Notification (DOR-4577) issued to any owner and lienholder of record. This must be sent by certified mail;
- 4) A copy of the certified mail return receipt(s) at least 30 days old, indicating all owners and lienholders of record, if applicable, have been sent DOR-4577 (see 3 above);
- 5) A copy of the notification the Department of Revenue issued to the towing company or a copy of the "Record Lookup Results" screen from the online record search;
- 6) A completed and signed Vehicle Examination Certificate (DOR-551), if applying for an "Original" title (contact the nearest Highway Patrol Headquarters for vehicle inspection); and
- 7) Abandoned Property Report (DOR-4669) completed by owner, lessee, property/security manager, tow company, and local law enforcement agency.

IMPORTANT: MILEAGE MUST BE SHOWN ON THE APPLICATION FOR TITLE FOR VEHICLES LESS THAN 10 YEARS OLD. IF THE MILEAGE IS UNOBTAINABLE, write in an estimated mileage and a statement at the bottom of the application that mileage is only estimated. Complete and attach an Odometer Disclosure Statement (DOR-3019) and include the reason for mileage estimate: fire, digital dash inoperable, or other. **THIS MUST ACCOMPANY THE APPLICATION FOR TITLE.**

CERTIFIED COPY OF ORDER

STATE OF MISSOURI }
County of Boone } ea.

April Session of the April Adjourned

Term. 20 16

In the County Commission of said county, on the 21st day of April 20 16

the following, among other proceedings, were had, viz:

Now on this day the County Commission of the County of Boone does hereby approve the Organizational Use of the Centralia Clinic by PEO – Chapter KZ from 8:00 a.m. to 12:00 p.m. for the following dates:

2016

- May 3
- May 17
- June 7
- September 20
- October 4
- October 18
- November 1
- December 13

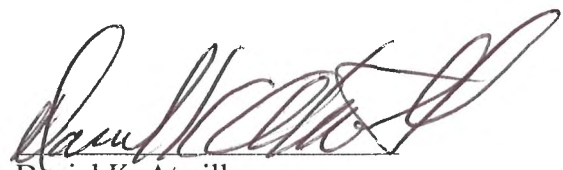
2017

- January 17
- February 7
- February 21
- March 7

Done this 21st day of April, 2016.

ATTEST:

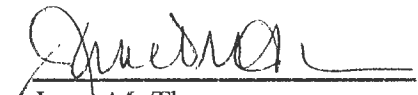
Wendy S. Noren
Wendy S. Noren
Clerk of the County Commission



Daniel K. Atwill
Presiding Commissioner



Karen M. Miller
District I Commissioner



Janet M. Thompson
District II Commissioner

Daniel K. Atwill, Presiding Commissioner
Karen M. Miller, District I Commissioner
Janet M. Thompson, District II Commissioner



Roger B. Wilson
Boone County Government Center
801 East Walnut, Room 333
Columbia, MO 65201-7732
573-886-4305 • FAX 573-886-4311

Boone County Commission

APPLICATION FOR ORGANIZATIONAL USE OF BOONE COUNTY CONFERENCE ROOMS

The undersigned organization hereby applies for a use permit to use Boone County Government conference rooms as follows:

Organization: DEB - CHAPTER KZ

Address: _____

City: _____ State: _____ ZIP Code: _____

Phone: _____ Website: _____

Individual Requesting Use: _____ Position in Organization: _____

Facility requested: Chambers Room 301 Room 311 Room 332 Centralia Clinic

Event: CHAPTER MEETINGS

Description of Use (ex. Speaker, meeting, reception): _____

Date(s) of Use: Mr 1, 2016; Mr 15; Apr 5, 19; May 3, 17; June 7; Sept 20; Oct 4, 18; Nov 1

Start Time of Setup: 8:00 AM/PM Start Time of Event: 9:30 AM/PM

End Time of Event: 11:30 AM/PM End Time of Cleanup: 12:00 AM/PM

- The undersigned organization agrees to abide by the following terms and conditions in the event this application is approved:
- To abide by all applicable laws, ordinances and county policies in using Boone County Government conference rooms.
 - To remove all trash or other debris that may be deposited (by participants) in rooms by the organizational use.
 - To repair, replace, or pay for the repair or replacement of damaged property including carpet and furnishings in rooms.
 - To conduct its use in such a manner as to not unreasonably interfere with Boone County Government building functions.
 - To indemnify and hold the County of Boone, its officers, agents and employees, harmless from any and all claims, demands, damages, actions, causes of action or suits of any kind or nature including costs, litigation expenses, attorney fees, judgments, settlements on account of bodily injury or property damage incurred by anyone participating in or attending the organizational use of rooms as specified in this application.

Organization Representative/Title: DEBORAH HEURMAN * EDWARD JONES CORP

Phone Number: (573) 682-0417; (573) 682-1815 Date of Application: 4/19/2016

Email Address: DEBORAH.HEURMAN@EDWARDJONES.COM

Applications may be submitted in person or by mail to the Boone County Commission, 801 E. Walnut, Room 333, Columbia, MO 65201 or by email to commission@boonecountymo.org.

PERMIT FOR ORGANIZATIONAL USE OF BOONE COUNTY GOVERNMENT CONFERENCE ROOMS

The County of Boone hereby grants the above application for permit in accordance with the terms and conditions above written. The above permit is subject to termination for any reason by duly entered order of the Boone County Commission.

ATTEST:
Wendy S. Noew
County Clerk
DATE: 4-21-16

BOONE COUNTY, MISSOURI
[Signature]
County Commissioner

CERTIFIED COPY OF ORDER

STATE OF MISSOURI }
County of Boone } ea.

April Session of the April Adjourned

Term. 20 16

In the County Commission of said county, on the 21st day of April 20 16

the following, among other proceedings, were had, viz:

Now on this day the County Commission of the County of Boone does hereby approve the Organizational Use of the Government Center Chambers and Courthouse Plaza by Nakita Cade for May 20, 2016 as follows:

Chambers: 12:30 p.m. to 4:30 p.m.
Courthouse Plaza: 12:30 p.m. to 4:00 p.m.

Done this 21st day of April, 2016.

ATTEST:

Wendy S. Noren
Wendy S. Noren
Clerk of the County Commission

Daniel K. Atwill
Daniel K. Atwill
Presiding Commissioner

Karen M. Miller
Karen M. Miller
District I Commissioner

Janet M. Thompson
Janet M. Thompson
District II Commissioner



Boone County Commission

APPLICATION FOR ORGANIZATIONAL USE OF BOONE COUNTY CONFERENCE ROOMS

The undersigned organization hereby applies for a use permit to use Boone County Government conference rooms as follows:

Organization: Elijah and Nakita

Address: 1902 Garnet Dr

City: Columbia State: MO ZIP Code 65202

Phone: 573-529-9905 Website: _____

Individual Requesting Use: Nakita Cade Position in Organization: Bride

Facility requested: Chambers Room 301 Room 311 Room 332 Centralia Clinic

Event: Wedding

Description of Use (ex. Speaker, meeting, reception): Reception

Date(s) of Use: May 20, 2016

Start Time of Setup: 12:30 AM/PM Start Time of Event: 2:00 pm

End Time of Event: 2:45 AM/PM End Time of Cleanup: 4:30 pm

The undersigned organization agrees to abide by the following terms and conditions in the event this application is approved:

1. To abide by all applicable laws, ordinances and county policies in using Boone County Government conference rooms.
2. To remove all trash or other debris that may be deposited (by participants) in rooms by the organizational use.
3. To repair, replace, or pay for the repair or replacement of damaged property including carpet and furnishings in rooms.
4. To conduct its use in such a manner as to not unreasonably interfere with Boone County Government building functions.
5. To indemnify and hold the County of Boone, its officers, agents and employees, harmless from any and all claims, demands, damages, actions, causes of action or suits of any kind or nature including costs, litigation expenses, attorney fees, judgments, settlements on account of bodily injury or property damage incurred by anyone participating in or attending the organizational use of rooms as specified in this application.

Organization Representative/Title: Elijah's & Nakita's wedding

Phone Number: 573-529-9905 Date of Application: 4/13/16

Email Address: Kbk4ever5@gmail.com

Applications may be submitted in person or by mail to the Boone County Commission, 801 E. Walnut, Room 333, Columbia, MO 65201 or by email to commission@boonecountymmo.org.

PERMIT FOR ORGANIZATIONAL USE OF BOONE COUNTY GOVERNMENT CONFERENCE ROOMS

The County of Boone hereby grants the above application for permit in accordance with the terms and conditions above written. The above permit is subject to termination for any reason by duly entered order of the Boone County Commission.

ATTEST:

Wendy S. Nowmy
County Clerk

BOONE COUNTY, MISSOURI
[Signature]
County Commissioner

DATE: 4-21-16



Boone County Commission

APPLICATION FOR ORGANIZATIONAL USE OF BOONE COUNTY COURTHOUSE PLAZA

The undersigned organization hereby applies for a use permit to use the Boone County Courthouse Plaza as follows:

Organization: Elijah + Nakita

Address: 1902 Garnet Dr

City: Columbia State: MO ZIP Code: 65202

Phone: 573-529-9905 Website: _____

Individual Requesting Use: Nakita Code

Position in Organization: Spouse

Address: _____

City: _____ State: _____ ZIP Code: _____

Phone: _____ Email: kbk4ever5@gmail.com

Event: Elijah's + Nakita's Wedding Day

Description of Use (ex. Concert, speaker, 5K): wedding

Date(s) of Use: May 20th, 2016

Start Time of Setup: 12:30 AM/PM AM PM

Start Time of Event: 2:00 AM/PM (If start times vary for multiple day events, please specify)

End Time of Event: 2:30 AM/PM (If end times vary for multiple day events, please specify)

End Time of Cleanup: 4:00 AM/PM AM PM

Emergency Contact During Event: Elijah DuBose Phone: (678)200-8478

Will this event be open to the public? Yes No

If yes, please explain the publicity that will be used to promote the event, including names and contact information of any promoters: We will have no promos, but anybody walking by is welcome.

How many attendees (including volunteers) do you anticipate being at your event? 65-75

If you anticipate more than 50 attendees (including volunteers) at your event, please detail your safety plan in the event of an emergency. If you have a separate Fire Safety, Public Safety and Evacuation Plan, please submit with application. In case of a dangerous weather

emergency everybody will go to the basement of the armory.

If you anticipate more than 1000 attendees (including volunteers), please provide the names and contact information of your crowd managers (1 per every 250 attendees): _____

Will the majority of attendees be under the age of 18? Yes No

If yes, please note the number of adult supervisors in attendance: _____ # adults per _____ # minors

Will you need access to electricity? Yes No

Will you be using amplifiers? Yes No

Will you be serving food and/or non-alcoholic drinks? Yes No

If yes, will you be **selling** food and/or non-alcoholic drinks? Yes No

If yes, please provide the following with copies of licenses attached to application:

Missouri Department of Revenue Sales Tax Number: _____

County Merchant's License Number: _____

City Temporary Business License Number: _____

Will you be serving alcoholic beverages? Yes No

If yes, will you be **selling** alcoholic beverages? Yes No

If yes, please provide the following with copies of licenses attached to application:

State Liquor License Number: _____

County Liquor License Number: _____

City Liquor License Number: _____

Will you be selling non-food items? Yes No

If yes, please provide the following with copies of licenses attached to application:

Missouri Department of Revenue Sales Tax Number: _____

County Merchant's License Number: _____

City Temporary Business License Number: _____

Will outside vendors be selling food, beverages or non-food items at this event? Yes No

If yes, please provide the following information (use separate sheet if necessary):

Vendor	Type of Sales	Contact Information	License Number(s)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Will you be requesting a road and/or sidewalk closure? Yes No

If yes, what road(s) and/or sidewalk(s)? _____

Please attach to application a copy of the order showing City of Columbia City Council approval.

Does your event include cooking or use of open flames? Yes No

If yes, please provide the Columbia Fire Department Special Events Permit Number: _____

Please attach to application a copy of the approved Columbia Fire Department Special Events Permit

Events that may pose increased responsibilities to the local law enforcement may be required to enlist the services of a professional security company. This will be determined by the Boone County Sheriff's Department and Boone County Commission. If necessary, have you hired a security company to handle security arrangements for this event? Yes No

If yes, please provide the following:

Security Company: _____

Contact Person Name and Position: _____

Phone: _____ Email: _____

Will you be using portable toilets for your event? Yes No

**Please note: portable toilets are not permitted on the Boone County Courthouse Plaza grounds. Please contact the City of Columbia for options.

If your event is such that requires insurance per the Boone County Courthouse Plaza Rules and Regulations, please provide a copy of acquired insurance plan.

The undersigned organization agrees to abide by the following terms and conditions in the event this application is approved:

1. To notify the Columbia Police Department and Boone County Sheriff's Department of time and date of use and abide by all applicable laws, ordinances and county policies in using Courthouse Plaza grounds.
2. To abide by all rules and regulations as set forth in the Boone County Courthouse Plaza Rules and Regulations document updated July 11, 2013 and attached to this document.
3. To remove all trash or other debris that may be deposited (by participants) on the courthouse grounds and/or in rooms by the organizational use.
4. To repair, replace, or pay for the repair or replacement of damaged property including shrubs, flowers or other landscape caused by participants in the organizational use of courthouse grounds and/or carpet and furnishings in rooms.
5. To conduct its use of Courthouse Plaza grounds in such a manner as to not unreasonably interfere with normal courthouse and/or Boone County Government building functions.
6. To indemnify and hold the County of Boone, its officers, agents and employees, harmless from any and all claims, demands, damages, actions, causes of action or suits of any kind or nature including costs, litigation expenses, attorney fees, judgments, settlements on account of bodily injury or property damage incurred by anyone participating in or attending the organizational use on the courthouse grounds and/or use of rooms as specified in this application.

Organization Representative/Title: Nakita Cade

Address: 1902 Garnet Dr

Phone Number: (573) 529-9905 Date of Application: May 20, 2016

Email Address: hb4ever5@gmail.com

Signature: _____

Applications may be submitted in person or by mail to the Boone County Commission, 801 E. Walnut, Room 333, Columbia, MO 65201 or by email to commission@boonecountymmo.org.

PERMIT FOR ORGANIZATIONAL USE OF BOONE COUNTY COURTHOUSE PLAZA

The County of Boone hereby grants the above application for permit in accordance with the terms and conditions above written. The above permit is subject to termination for any reason by duly entered order of the Boone County Commission.

ATTEST:

Wendy S. Nowe
County Clerk

BOONE COUNTY, MISSOURI
[Signature]
County Commissioner

DATE: 4-21-16