Form No. 1 (Rev 10/87)

TURN-IN DOCUMENT (TID)
SURPLUS PROPERTY

TO: SURPLUS PROPERTY OFFICE
1441 BOSTON AVENUE
WEST COLUMBIA, S.C. 29170

PAGE 1 OF _____

SPO USE ONLY
SPO CONTROL NO. _____
DATE SCHEDULED FOR PICKUP OR DELIVERY _____

1. DATE MAILED _____ 2. AGENCY REPORT NO. _____ 3. TOTAL A/C COST $ _____

4. FROM: AGENCY NO. _____ NAME: _____ ADDRESS: _____

CITY, STATE AND ZIP CODE _____ TELEPHONE NO. _____

5. REIMBURSEMENT REQ. ____ YES _____ NO FUND CODE TO BE REIMBURSED (IF ANY) _____

6. AGENCY CONTACT PERSON: NAME _____ ADDRESS _____

CITY, STATE AND ZIP CODE _____ TELEPHONE NO. _____

7. REPORT APPROVED BY: NAME _____ TITLE _____ SIGNATURE _____

8. DATE REQUESTED FOR DELIVERY OR PICKUP: _____ 9. LOCATION OF PROPERTY _____

10. RELEASED BY: SIGNATURE (AGENCY) _____ DATE _____ 11. SCREENED BY: _____ DATE _____

12. RECEIVED AT SPO: SIGNATURE _____ DATE _____ CYCLE NO. _____

13. SURPLUS PROPERTY LISTINGS:

ITEM NUMBER (A)	COMMODITY CODE (B)	YEAR PURCHASED (C)	DESCRIPTION (D)	DECAL NUMBER (E)	QUANTITY (F)	UNIT OF MEASURE (G)	ACQUISITION COST PER UNIT (H)	ACQUISITION COST TOTAL (I)	SPO USE ONLY COND. SERVICE CHG. S OR J (IF APP.) (J)	(K)
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