

**AGENDA PLACEMENT FORM**

(Submission Deadline – Monday, 5:00 PM before Regular Court Meetings)

Date: 8/28/2025

Meeting Date: 9/8/2025

Submitted By: Codey Sibley

Department: Facilities Management

Signature of Elected Official/Department Head:



<b>Court Decision:</b> <small>This section to be completed by County Judge's Office</small>

<p>9-8-2025</p>

**Description:**

Consider and Approve the Transfer of a Laser Level ( Inventory Tag # 981062) and Transit ( Inventory Tag # 981060) from Facilities Management to Precinct 1 Road and Bridge

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(May attach additional sheets if necessary)

Person to Present: Codey Sibley

(Presenter must be present for the item unless the item is on the Consent Agenda)

Supporting Documentation: (check one)     PUBLIC     CONFIDENTIAL

(PUBLIC documentation may be made available to the public prior to the Meeting)

Estimated Length of Presentation: 3 minutes

Session Requested: (check one)

Action Item     Consent     Workshop     Executive     Other \_\_\_\_\_

Check All Departments That Have Been Notified:

County Attorney     IT     Purchasing     Auditor  
 Personnel     Public Works     Facilities Management

Other Department/Official (list) \_\_\_\_\_

**Please List All External Persons Who Need a Copy of Signed Documents  
In Your Submission Email**

**JOHNSON COUNTY PURCHASING DEPARTMENT  
TRANSFER OF PROPERTY**

Fill in all information that applies to transfer. Check applicable box below.

Transfer to Department	PCT 1
Transfer to Surplus	
Transfer to Salvage	

Date: 5-20-25 Inventory Tag#: 981060

From Department: Facilities Dept. No: \_\_\_\_\_

Receiving Department: PCT 1 Dept. No: \_\_\_\_\_

Inventory Description (equipment, vehicle, furniture, type, color, etc.):  
\_\_\_\_\_  
Transit  
\_\_\_\_\_

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_

Serial/VIN #: \_\_\_\_\_

If Seized Equipment, include Cause # \_\_\_\_\_ and attach applicable paperwork.

Transaction approved by Commissioner's Court: \_\_\_\_\_ (if applicable)  
Date

  
\_\_\_\_\_  
From Elected Official/Department Head Date 5-20-25

  
\_\_\_\_\_  
To Elected Official/Department Head Date 6-4-25

\_\_\_\_\_  
Purchasing Agent or Designee Date

Purchasing Department Only:

Entered into Inventory system: Date: \_\_\_\_\_ Initials: \_\_\_\_\_

Notations: \_\_\_\_\_

Send original to Purchasing Department. Keep a copy for Department records.

**JOHNSON COUNTY PURCHASING DEPARTMENT  
TRANSFER OF PROPERTY**

Fill in all information that applies to transfer. Check applicable box below.

Transfer to Department	<u>PCT 1</u>
Transfer to Surplus	
Transfer to Salvage	

Date: 5-20-25 Inventory Tag#: 981062

From Department: Facilities Dept. No: \_\_\_\_\_

Receiving Department: PCT 1 Dept. No: \_\_\_\_\_

Inventory Description (equipment, vehicle, furniture, type, color, etc.):  
\_\_\_\_\_  
Laser Level  
\_\_\_\_\_

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_

Serial/VIN #: \_\_\_\_\_

If Seized Equipment, include Cause # \_\_\_\_\_ and attach applicable paperwork.

Transaction approved by Commissioner's Court: \_\_\_\_\_ (if applicable)  
Date

[Signature] \_\_\_\_\_ 5-20-25  
From Elected Official/Department Head Date

[Signature] \_\_\_\_\_ 6-4-25  
To Elected Official/Department Head Date

Purchasing Agent or Designee \_\_\_\_\_ Date

Purchasing Department Only:

Entered into Inventory system: Date: _____ Initials: _____
Notations: _____

Send original to Purchasing Department. Keep a copy for Department records.