## HSD PROPERTY CONTROL CONTRACTOR FORM C-063 (value under \$5000, n<u>ot</u> IT equipment)

FROM(OFFICE)		COMMENTS:			
Address		COMINIENTS.			
Contact/Phone					
Program Manager					
ТО					
ADDRESS					
Contact/Phone		Reg	uested Action:		
<u>Signatures &amp; Date</u>		Transfer (T) Donation (D)			
Transferring FAFM					
Receiving FAAM		. Don Des	truction (DE)		
ASD FAM		Rec	ycle (R)		
ASD Bureau Chief		Inve	ntory (I)		
Serial Number	Item/description	Condition	Requested Action	Estimated curre	nt value