REPORT OF PROPERTY FOR SURVEY

1. DATE	2. SURVEY NUMBER	
	A. CO OR REGIONAL BOARD	B. GSA BOARD

3. ACCOUNTABLE ORGANIZATIONAL UNIT	4. ADDRESS AND OFFICE SYMBOL
5. REASON FOR SURVEY ACTION *(Theft, damage, etc.)*	6. LOCATION OF PROPERTY

7. ITEM DESCRIPTION	8. NATIONAL STOCK NUMBER OR SERIAL NUMBER	9. QTY	10. CAPITALIZED ITEMS			11. NON-CAPITALIZED ITEMS			12. OTHER COSTS
			A. YEAR PUR-CHASED	B. TOTAL CAP. VALUE	C. TOTAL BOOK VALUE	A. TOTAL PUR-CHASED	B. TOTAL ACQ. VALUE	C. TOTAL EST. FAIR MKT. VALUE	
	TOTAL ▷				$			$	$

13. I CERTIFY THAT THE ATTACHED /FOLLOWING STATEMENT(S) ARE TRUE AND COMPLETE, GIVING AS MUCH INFORMATION *(names, dates, etc.)* AS IS AVAILABLE AT THE DATE OF THIS REPORT:

A. NAME AND SIGNATURE OF PROPERTY CUSTODIAN	B. ODFFICE SYMBOL	C. DATE	D. TELEPHONE NO.

14. I HAVE VERIFIED THAT THE STATEMENTS IN THIS REPORT AND ON THE ATTACHMENTS ARE TRUE ADN COMPLETE

THERE ____ (IS) ____ (IS NOT) AN INDICATION OF THEFT, FRAUD, MISMANAGEMENT, OR OTHER MISMANAGEMENT, OR OTHER WRONFUL ACCTS.

THE FINDINGS OF AN INVESTIGATIVE OFFICE ARE:

- ☐ NEGATIVE
- ☐ PENDING FURTHER INVESTIGATION: WILL FORWARD WHEN COMPLETED
- ☐ ATTACHED

A. NAME ADN SIGNATURE OF ACCOUNTABLE OFFICER	B. TITLE/OFFICE SYMBOL	C. DATE	D. TELEPHONE NO.

15A. NAME AND SIGNATURE OF CO OR REGIONAL PROPERTY MGMT. OFFICER	15B. OFFICE SYMBOL	15C. DATE	15D. TELEPHONE NO.

16A. NAME AND SIGNATURE OF HEAD OF ACQUISITION AND CONTROL UNIT *(Operating or A1 Equipment)*	16B. TITLE/OFFICE SYMBOL	16C. DATE	16D. TELEPHONE NO.

17. FINDINGS OF CO OR REGIONAL BOARD SURVEY:

17B. ACTION(S) OF GSA BOARD OF SURVEY *(Check as many as are applicable)*:

- ☐ (1) APPROVES THE REMOVAL OF THE ITEM(S) FROM THE FINANCIAL ADN/OR INVENTORY RECORDS.
- ☐ (2) RELIEVES THE PROPERTY CUSTODIAN OF ANY LIABILITY, FINANCIAL OR OTHERWISE.
- ☐ (3) RELIEVES THE EMPLOYEE USING THE PROPERTY OF ANY LIABILITY, FINANCIAL OR OTHERWISE.
- ☐ (4) RECOMENDS REIMBURSEMENT BE OBTAINED IN THE AMOUNT OF $ _____ FROM:

NAME: _____ TITLE: _____ OFF. _____

- ☐ (5) RECOMMENDS DISCIPLINARY ACTION IN ACCORDANCE WITH THE PENALTY GUIDE (OAD P 5410.L, ch. 3, pt. 8).
- ☐ (6) FORWARDS THIS SURVEY TO GSA BOARD FOR FINAL ACTION *(When applicable)*

17C. SIGNATURES OF CO OR REGIONAL BOARD OF SURVEY MEMBERS REVIEWING THE CASE:

CHAIRPERSON	MEMBER	MEMBER
MEMBER	MEMBER	MEMBER
MEMBER	MEMBER	MEMBER

18A. FINDINGS OF GSA BOARD OF SURVEY *(When applicable)*:

18B. ACTION(S) OF GSA BOARD OF SURVEY *(Check as many as are applicable)*:

- ☐ (1) APPROVES THE REMOVAL OF THE ITEM(S) FROM THE FINANCIAL AND/OR INVENTORY RECORDS.
- ☐ (2) RELIEVES THE PROPERTY CUSTODIAN OF ANY LIABILITY, FINANCIAL OR OTHERWISE.
- ☐ (3) RELIEVES THE EMPLOYEE USING THE PROPERTY OF ANY LIABILITY, FINANCIAL OR OTHERWISE.
- ☐ (4) RECOMMENDS REIMBURSEMENT BE OBTAINED IN THE AMOUNT OF $ _____ FROM:

NAME: _____ TITLE: _____ OFF. _____

- ☐ (5) RECOMMENDS DISVIPLINARY ACTION IN ACCORDANCE WITH THE PENALTY GUIDE (OAD P 5410.L, ch.3, pt. 8).

18C. SIGNATURES OF GSA BOARD OF SURVEY MEMBERS REVIEWING THE REPORT:

CHAIRPERSON	MEMBER	MEMBER
MEMBER	MEMBER	MEMBER
MEMBER	MEMBER	MEMBER

19. CERTIFICATES OF ACCOMPLISHMENT

A. I CERTIFY THAT *(Check boxes below as appropriate)*:

(1) ☐ THE PROPERTY SURVEYED IN THIS REPORT HAS BEEN EXPENDED FROM THE ACCOUNTING RECORDS.

(2) ☐ THE SUM OF $ _____ HAS BEEN BILLED AS DIRECTED, AND IMMEDIATE STEPS WILL BE TAKEN TO COLLECT AND DEPOSIT THAT AMOUNT.

(3) ☐ THE GENERAL ACCOUNTING OFFICE HAS BEEN ADVISED OF THE CHARGE AS REQUIRED BY 28 STAT. 24 (Title 31 u.s. Code, Section 3531).

B. I CERTIFY THAT THE PROPERTY SURVEYED IN THIS REPORT HAS BEEN REMOVED FROM THE FOLLOWING INVENTORY RECORDS *(Check appropriate boxes below)*:

(1) ☐ PROPERTY INVENTORY MANAGEMENT SYSTEM (PIMS)

(2) ☐ EQUIPMENT DEPRECIATION INVENTORY CONTROL SYSTEM (EDICS)

(3) ☐ AUTOMATED INFORMATION EQUIPMENT INVENTORY SYSTEM

SIGNATURE	DATE	SIGNATURE	DATE
TITLE	OFFICE SYMBOL	TITLE	OFFICE SYMBOL