



**GOVERNMENT OF GUAM  
DEPARTMENT OF ADMINISTRATION  
FINANCIAL MANAGEMENT SYSTEM**

Guam Community College  
P.O. Box 23069  
Barrigada, Guam 96921  
Telephone: 671-735-5540/5542

Subject Title:

**REPORT OF SURVEY (Part 1 of 2)**

(Revised April 1987)

REPORT NO: \_\_\_\_\_

DATE: \_\_\_\_\_

**MEMORANDUM**

To: Director, Department of Administration

Via: Plant & Property Management Section  
**GENERAL SERVICES AGENCY**

From: **Guam Community College**, \_\_\_\_\_  
Department Name

Subject: **Equipment Survey**

We certify that the property(ies) listed on this Report Of Survey is/are recommended for disposition to be made thereof as indicated. As Head of this Department, I certify disposition of the Government property as the need arises, and determine liability relative to lost, usefulness, stolen and/or damaged property.

ITEM NO.	PROPERTY NO.	DESCRIPTION	VALUE	DISPOSITION *			
				A	B	C	D
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							

**\*DISPOSITION LEGEND**

- A** – To be destroyed
- B** – Advertise for sale
- C** – Transferred to GSA
- D** – Used for repairs

Prepared by:

Certified by:

\_\_\_\_\_  
DEPT'S. PROPERTY LIAISON

\_\_\_\_\_  
DEPARTMENT/AGENCY HEAD  
**Mary A. Y. Okada, Ed.D., PRESIDENT**

Please Print or Type Name Here

\_\_\_\_\_  
DEPARTMENT/AGENCY PROPERTY OFFICER  
**Theda B. Rios, Inventory Management Officer**



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Subject Title:

**REPORT OF SURVEY (Part 2 of 2)**

(Revised April 1987)

REPORT NO: \_\_\_\_\_

DATE: \_\_\_\_\_

**Date and Circumstances:**

**Findings:**

**Recommendations: SURVEY to GSA.**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

SHOULD INCLUDE RECOMMENDATION FOR COLLECTION FROM RESPONSIBLE  
EMPLOYEE(S) OR RELEASE FROM LIABILITY.

**(TO BE COMPLETED ON SURVEY OF UNSERVICEABLE PROPERTY)**

We verify that the property listed on Part 1 of this report has been inspected by our office and  
recommend disposition to be made thereof as indicated.

Plant & Property Management  
Section Supervisor:

Approved by: \_\_\_\_\_  
Dept's. Property Officer

Date: \_\_\_\_\_ Date: \_\_\_\_\_

Accepted by: \_\_\_\_\_ Date: \_\_\_\_\_  
Director of Administration

**NOTE:** Additional sheets of paper, properly captioned, may be used if necessary. Upon completion of this  
report, a copy will be provided to the Department/Agency Property Officer, Generals Services Agency, and the  
Director of Administration by the Plant and Property Management Section.



