Listuguj Mi'gmaq Government

Gespe'gewaq (THE PEOPLE OF TH E LAST LAND)

Form AD-1 Asset Surplus Transfer & Disposal Request



	NAME:		DEPARTMENT:		
	POSITION:		DIRECTORATE:		
	DATE:		MANAGER:		
	IDENTIFY SURPLUS ASSET:				
	PURCHASE DATE:				
	PURCHASE VALUE:				
	ESTIMATED CURRENT VALUE:				
REASON FOR DISPOSAL Describe the asset to be transferred or disposed of.					
OTHER COMMENTS					
Reserved for use by Executive Office only					
	DATE RECEIVED:		RECEIVED BY:		
	APPROVED BY:		SIGNATURE:		
	RECOMMENDATION(S)				
	by CEO:				