CMS

Surplus Property Delivery Form

This Form Must Accompany All Surplus Items Delivered

Springfield Warehouse
1924 So 10 1/2 Street
Springfield, Illinois 62703
(217) 782-7786

Tag Number	Description	Purchase Date	Purchase Price
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
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29.			
30.			

Agency Name: _____

(CMS warehouse personnel)

Address: _____

Received by: _____

Date:_____

City: _____

Telephone: _____ **Agency Email:** _____

Agency Property Liaison: _____

Form no. Il4011354