

2017.064

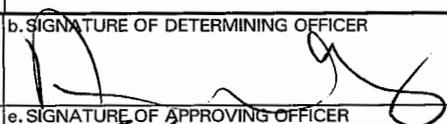
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<b>TRANSFER ORDER SURPLUS PERSONAL PROPERTY</b>		1. ORDER NUMBER(S) a. INV#2017202121 b. INV#2016203411		FORM APPROVED OMB NUMBER <b>3090-0014</b>	PAGE 1 OF 1 PAGES
2. TYPE OF ORDER <input type="checkbox"/> STATE AGENCY <input type="checkbox"/> DOD(SEA) <input type="checkbox"/> FAA		3. SURPLUS RELEASE DATE <b>07/26/2017</b>	4. SET ASIDE DATE	5. <input type="checkbox"/> NON-REPORTABLE <input checked="" type="checkbox"/> REPORTABLE	6. TOTAL ACQUISITION COST <b>N/A</b>
7. TO <b>GENERAL SERVICES ADMINISTRATION*</b> Office of Law Enforcement				8. LOCATION OF PROPERTY USFWS/OLE 4901 Paseo del Norte NE, Suite D Albuquerque, New Mexico 87113	
9. HOLDING AGENCY (Name and address)* USFWS/OLE 4901 Paseo del Norte NE, Suite D Albuquerque, New Mexico 87113				<b>10. FOR GSA USE ONLY</b>	
				SOURCE CODE <input type="checkbox"/>	
				STATE <input type="checkbox"/> <input type="checkbox"/> CITY <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
				TYPE OF DONATION <input type="checkbox"/> <input type="checkbox"/>	
				ADJUSTED ALLOCATION CODE <input type="checkbox"/> <input type="checkbox"/>	

11. PICKUP OR SHIPPING INSTRUCTIONS\*  
N/A

**12. SURPLUS PROPERTY LIST**

L/I NO. (a)	IDENTIFICATION NUMBER(S) (b)	DESCRIPTION (c)	DEMIL. CODE (d)	COND. CODE (e)	QUANTITY AND UNIT (f)	ACQUISITION COST	
						UNIT (g)	TOTAL (h)
N/A	764460	One (1) male Mexican Gray Wolf # 1568	N/A	N/A	1	N/A	N/A
N/A	701879	One (1) male Mexican Gray Wolf # 1404	N/A	N/A	1	N/A	N/A
=====	=====	=====NOTHING FOLLOWS=====	=====	=====	=====	=====	=====

<b>13. TRANSFEREE ACTION</b>  Transferee certifies and agrees that transfers and donations are made in accordance with 41 CFR 101-44, and to the terms, conditions, and assurances as specified on this document.	a. TRANSFEREE (Name and address of State Agency, SEA, or public airport)*  University of New Mexico Museum of Southwestern Biology 302 Yale Blvd NE CERIA 83, Rm 204 Albuquerque, NM 87131	b. SIGNATURE AND TITLE OF STATE AGENCY OR DONEE REPRESENTATIVE    c. DATE
	d. SIGNATURE OF HEAD OF THE SEA (School or National Headquarters)	e. DATE
<b>14. ADMINISTRATIVE ACTION</b>  I certify that the administrative actions pertinent to this order are in accordance with 41 CFR 101-44 and as specified on this document have been and are being taken.	a. DETERMINING OFFICER (DOD or FAA)*  SA Adrienne Ruiz, SA0790	b. SIGNATURE OF DETERMINING OFFICER    c. DATE <b>7/26/17</b>
	d. GSA APPROVING OFFICER  RAC Ariel Vazquez	e. SIGNATURE OF APPROVING OFFICER    f. DATE <b>7/26/17</b>

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<b>TRANSFER ORDER SURPLUS PERSONAL PROPERTY</b>		1. ORDER NUMBER(S) a. INV#2017201153 b. _____		FORM APPROVED OMB NUMBER <b>3090-0014</b>	PAGE 1 OF 1 PAGES
2. TYPE OF ORDER <input type="checkbox"/> STATE AGENCY <input type="checkbox"/> DOD(SEA) <input type="checkbox"/> FAA		3. SURPLUS RELEASE DATE <b>07/26/2017</b>	4. SET ASIDE DATE	5. <input type="checkbox"/> NON-REPORTABLE <input checked="" type="checkbox"/> REPORTABLE	6. TOTAL ACQUISITION COST <b>N/A</b>
7. TO <b>GENERAL SERVICES ADMINISTRATION*</b> Office of Law Enforcement				8. LOCATION OF PROPERTY USFWS/OLE 4901 Paseo del Norte NE, Suite D Albuquerque, New Mexico 87113	
9. HOLDING AGENCY (Name and address)* USFWS/OLE 4901 Paseo del Norte NE, Suite D Albuquerque, New Mexico 87113				10. FOR GSA USE ONLY SOURCE CODE <input type="checkbox"/> STATE <input type="checkbox"/> <input type="checkbox"/> CITY <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> TYPE OF DONATION <input type="checkbox"/> <input type="checkbox"/> ADJUSTED ALLOCATION CODE <input type="checkbox"/> <input type="checkbox"/>	
11. PICKUP OR SHIPPING INSTRUCTIONS* N/A					

12. SURPLUS PROPERTY LIST							
L/I NO.	IDENTIFICATION NUMBER(S)	DESCRIPTION	DEMIL. CODE	COND. CODE	QUANTITY AND UNIT	ACQUISITION COST	
						UNIT	TOTAL
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
N/A	809918	One (1) male Mexican Gray Wolf # 992	N/A	N/A	1	N/A	N/A
=====	=====	=====NOTHING FOLLOWS=====	=====	=====	=====	=====	=====

13. TRANSFEREE ACTION  Transferee certifies and agrees that transfers and donations are made in accordance with 41 CFR 101-44, and to the terms, conditions, and assurances as specified on this document.	a. TRANSFEREE (Name and address of State Agency, SEA, or public airport)*  University of New Mexico Museum of Southwestern Biology 302 Yale Blvd NE CERIA 83, Rm 204 Albuquerque, NM 87131	b. SIGNATURE AND TITLE OF STATE AGENCY OR DONEE REPRESENTATIVE	c. DATE
		d. SIGNATURE OF HEAD OF THE SEA (School or National Headquarters)	e. DATE
14. ADMINISTRATIVE ACTION  I certify that the administrative actions pertinent to this order are in accordance with 41 CFR 101-44 and as specified on this document have been and are being taken.	a. DETERMINING OFFICER (DOD or FAA)*  SA Adrienne Ruiz, SA0790	b. SIGNATURE OF DETERMINING OFFICER	e. DATE
	d. GSA APPROVING OFFICER  RAC Ariel Vazquez	e. SIGNATURE OF APPROVING OFFICER	f. DATE