***WORKFORCE INNOVATION AND OPPORTUNITY ACT***

**Property Closeout Inventory Certification Form**

(Use this form when no longer funded with WIOA programs)

Subrecipient

[ ]  I certify that:

 [ ]  all equipment (per unit)

 [ ]  all supplies (aggregate)

currently in use has a fair market value of less than $5,000. We intend to retain, sell or dispose of these items at our discretion. Nothing will be reported to the state.

[ ]  I certify that:

 [ ]  equipment (per unit)

 [ ]  all supplies (aggregate)

with a fair market value of greater than $5,000 will be used as long as needed on any federally sponsored program. Preference will be given to programs funded by the Employment Training Administration. A completed inventory form is attached.

[ ]  **This GOVERNMENTAL AGENCY states:**

 [ ]  equipment (per unit)

 [ ]  all supplies (aggregate)

with a fair market value of greater than $5,000 will no longer be used in connection with other federally sponsored activity. We will RETAIN these items and reimburse the state the fair market value within 30 days. A completed inventory form is attached.

[ ]  **This GOVERNMENTAL AGENCY states:**

 [ ]  equipment (per unit)

 [ ]  all supplies (aggregate)

with a fair market value of greater than $5,000 is/are no longer needed. We will SELL these items and deduct any actual and reasonable selling and handling expenses ($500 or 10 percent, whichever is less). We will then forward the balance of funds as instructed in the closeout guide. Disposition is to be completed within 30 days of filing the final closeout reports. A completed inventory form is attached.

[ ]  **This NON-LOCAL AREA states:**

 [ ]  equipment (per unit)

 [ ]  all supplies (aggregate)

with a fair market value of greater than $5,000 will no longer be used in connection with other federally sponsored activity. We will RETAIN these items and reimburse the state the fair market value within 30 days. A completed inventory form is attached.

[ ]  **This NON-LOCAL AREA states:**

 [ ]  equipment (per unit)

 [ ]  all supplies (aggregate)

with a fair market value of greater than $5,000 is/are no longer needed. We will SELL these items and deduct any actual and reasonable selling and handling expenses ($500 or 10 percent, whichever is less). We will reimburse the state the balance of funds or will request disposition instructions from the state. Disposition is to be completed within 30 days of filing the final closeout reports. A completed inventory form is attached.

Subrecipient’s Authorized Representative Date

**Property Closeout Inventory Certification Form**

(Use this form when no longer funded with WIOA programs)

|  |
| --- |
| Subrecipient Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |
| We certify that the information provided is correct and accurate. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |

|  |  |  |
| --- | --- | --- |
| Property Information | Acquisition Information | Final Disposition Information |
| Description | ID Number | Date Acquired | Cost Basis | Condition | Fair Market Value | Federal program transferred to(if applicable) |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
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|  |  |
| --- | --- |
| Printed Name |       |
| Signature |  |

***WORFORCE INNOVATION AND OPPORTUNITY ACT***

**CLOSEOUT INVENTORY**

(Instructions for Completing WIOA Closeout Inventory)

|  |  |
| --- | --- |
| 1. **Description**
 | Provide a brief description of the equipment, e.g. Dell Computer Optiplex GX1. Dell Trinitron monitor. |
| 1. **ID Number**
 | Enter the identification number used to track the equipment for inventory control; e.g., manufacturer's serial number, model number, Federal stock number, national stock number, WIOA Tag number, or other identification number. |
| 1. **Date Acquired**
 | Enter the date the equipment was acquired (or date received), if the equipment was furnished by the federal government. |
| 1. **Cost Basis**
 | Enter the per unit cost of equipment or the aggregate cost of supplies at the time of procurement. |
| 1. **Condition**
 | Enter the condition of the equipment or supplies (good, fair, poor, not working, etc.) at the time of disposal. |
| 1. **Fair Market Value**
 | Enter the fair market value of each inventory listing. Use the instructions provided to determine the best way to compute the fair market value. |
| 1. **Federal program transferred to**
 | Provide the name of another federal program the inventory will be transferred to (if applicable). |