



STATE OF ALABAMA DEPARTMENT OF
PUBLIC HEALTH

Donald E. Williamson, MD
State Health Officer

DATE: _____
FROM: _____ (Unit Property Manager)
TO: Guy Woodall, Department Property Manager
SUBJECT: Property Inventory Certification

I, the undersigned, certify that I am responsible for the state property listed on the attached report (hereinafter referred to as "Asset Report"). I further certify that an audit was performed of Unit Property on _____, 20___. I further certify that the results of that audit confirmed that the Asset Report is true and correct except as to the items noted below, for which I have attached the appropriate documentation.

I understand that I am responsible for all such state property and may be required to reimburse the State of Alabama for any property for which an accounting cannot be made.

Missing Items _____

New Items _____

Location Code

Property Manager (Print)

Date

Property Manager (Signature)