

Capitalized Real Property (RP) Inventory Certification – Fiscal Year (FY) 2009

Organization Office Location(s): _____

I hereby certify that a physical capitalized real property inventory was completed for FY 2009, and that the attached information accurately describes and accounts for the RP assigned to this location.

Field Office Property Manager	
_____	_____
(Signature)	(Print Name)
_____	_____
(Title)	(Date)
Field Office Engineer	
_____	_____
(Signature)	(Print Name)
_____	_____
(Title)	(Date)
Recreation Personnel/Fire Facilities Manager/Others (when appropriate)	
_____	_____
(Signature)	(Print Name)
_____	_____
(Title)	(Date)
Field Office Manager	
_____	_____
(Signature)	(Print Name)
_____	_____
(Title)	(Date)
State Office Property Manager	
_____	_____
(Signature)	(Print Name)
_____	_____
(Title)	(Date)