

**ANNUAL CERTIFICATION OF PHYSICAL INVENTORY**  
for Fiscal Year Ending 08/31/\_\_\_\_\_

**06 - AgriLife Research**  
Agency #556

**07 - AgriLife Extension Service**  
Agency #555

**20 - TVMDL**  
Agency #557

|                         |  |
|-------------------------|--|
| <b>Department Code:</b> |  |
| <b>Department Name:</b> |  |

I hereby certify that a complete physical inventory has been taken of the property charged to the account and that all items on the attached listing are present, accounted for and properly numbered, except as noted below.

| Asset Number | Description | Value | Explanation |
|--------------|-------------|-------|-------------|
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**ALTERNATE ACCOUNTABLE PROPERTY OFFICER:**

|              |        |
|--------------|--------|
| (Print Name) | (Date) |
| (Signature)  |        |

**UNIT HEAD / PROGRAM LEADER / DEPARTMENT HEAD:**

|              |        |
|--------------|--------|
| (Print Name) | (Date) |
| (Signature)  |        |