

OFSS CERTIFICATION OF MOVABLE PROPERTY

**INSTRUCTIONS FOR THE COMPLETION OF MOVABLE PROPERTY CERTIFICATION TO OFSS**

**\*\*\*\*\* The Section Head of each section, must approve all Property Certifications. \*\*\*\*\***

These instructions are being provided to assist you in your annual certification of movable property to the Office of Finance and Support Services (OFSS). This certification will be utilized in your Annual Financial Report. Please make every effort to provide accurate information. Should you have any questions please call Marcia Darville at (225) 342-5993

**FORM A**

**PART A**

**COMPLETE LINES (1) THROUGH (6) OF THE CERTIFICATION IMMEDIATELY AFTER YOUR CERTIFICATION TO LOUISIANA PROPERTY ASSISTANCE AGENCY (LPAA).**

- LINE 1. Should be property totals at the end of previous fiscal year.
- LINE 2. (A) Research your files and utilize the LOWER portion of Form "C" to compile a list of those items that were SURPLUSED between July 1st of the current year and your LPAA certification date. NOTE: Enter only those items which had been physically removed from the premises at the time the LPAA certification was made. Enter the total on line 2A of the OFSS certification.
- (B) If there were any DELETIONS on your property report from LPAA which you did not initiate, provide a detail of these items using FORM "D".
1. If you DID NOT adjust the property report for these items, enter the total from schedule "D" on line 2B.
  2. If you DID adjust the property report, enter "None" on line 2B.
- LINE 3. (A) Research your files and utilize the UPPER portion of Form "C" to compile a list of those items that were PURCHASED between July 1st of the current year and your LPAA certification date. Enter the total on line 3A of the OFSS certification.
- (B) If there were any ADDITIONS on your property report from LPAA which YOU did not initiate, provide a detail of these items using FORM "D".
1. If you DID NOT adjust the property report for these items, enter the total from schedule "D" on line 3B.
  2. If you DID adjust the property report, enter "None" on line 3B.
- LINE 4. If you made adjustments to the property value reported on the LPAA report, complete FORM "E" and enter the net amount on line 4.
- LINE 5. Enter the result of lines (1) through (4). This amount should equal the amount certified to LPAA as "ADJUSTED TOTAL DOLLAR AMOUNT OF INVENTORY". Contact OFSS if the amount does not agree.
- LINE 6. Utilizing FORM "B" enter the amount of current discrepancies.

NOTE: For the OFSS certification the term "discrepancy" refers only to those items that were correctly listed on the property report but were NOT FOUND when the physical inventory was done (missing items). If an item should never have been listed on the property report, that item should NOT be reported a "discrepancy" but should be reported under lines 2B or 3B above.

**All discrepancies must be explained on Form F - Additional Disclosure Information Sheet.**

**This completes Part "A" of the annual certification of movable property to the Office of Finance and Support Services. Please send a COPY of the following items to OFSS within 10 days of your certification to LPAA. SIGN and DATE the COPY of FORM "A". Retain the originals for completion of Part "B" at June 30th.**

1. Certification to LPAA
2. FORM "A" Certification to OFSS (Part "A" completed)
3. FORM "C" Listing of items surplused and purchased for the period
4. FORM "B" Detail of discrepancies 1st, 2nd, 3rd and current year
5. FORM "D" Additions and deletions on property report that were not initiated by the agency.
6. FORM "E" Property value changes
7. FORM "F" Additional Disclosure Information Sheet
8. One copy of your Inventory By Agency Report, Additions, Deletions, Unlocated and Assets As Of XX (the date of certification) received from LPAA or InCircuit Reporting System

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### **PART B**

**At June 30th each year Part B of the OFSS Certification is to be completed. Please note, an additional physical inventory IS NOT required to complete this portion of the form. Utilizing the same form you used to complete Part A (lines 1 - 6), complete Part B (lines 7 through 13).**

- LINE 7. Research your files and utilize the LOWER portion of Form "C" to compile a list of those items that were SURPLUSED after your LPAA certification date and REMOVED from the premises prior to June 30th. Enter the total on line 7 of the OFSS certification.
- LINE 8. Research your files and utilize the UPPER portion of Form "C" to compile a list of those items that were PURCHASED and received) after your LPAA certification date and received prior to June 30th. Enter the total on line 8 of the OFSS certification.
- LINE 9. Enter the amount from FORM "A" line 2B.
- LINE 10. Enter the amount from FORM "A" line 3B.
- LINE 11. Enter the total of all items identified as lost or stolen since the last physical inventory and certification to LPAA. If you have not reported such items to LPAA, please do so immediately. Attach a DATED copy of your notification to LPAA for these items.
- LINE 12. Enter the net sum of lines (5) through (11). This amount should reflect the actual movable property on hand at June 30th as if a physical inventory had actually been taken.
- LINE 13. Complete the statement regarding reporting of items under \$1,000.

**NOTE: Part "B" must be completed and returned to OFSS as soon after June 30th as possible, no later than August 1st. Agencies who certify to LPAA in May and June must take the necessary steps to assure the certification to OFSS is submitted timely.**

# OFSS CERTIFICATION OF MOVABLE PROPERTY

## FORM A

\_\_\_\_\_  
AGENCY (COST CENTER) NAME

DIVISION OF ADMINISTRATION  
OFFICE OF FINANCE AND SUPPORT SERVICES  
P O BOX 94095 CAPITOL STATION  
BATON ROUGE, LA 70804-9095

This is to certify movable property inventory as of 06/30/2021

PART A: (1) Beginning Balance at 07/01/2020		_____
(2) LESS:		
(A) Items surplused between 07/01/2020 and LPAA Certification date	(-)	_____
(B) Items deleted from property report WITHOUT agency authorization	(-)	_____
(3) PLUS:		
(A) Purchases RECEIVED between 07/01/2020 and LPAA Certification date	(+)	_____
(B) Items added to property report WITHOUT agency authorization	(+)	_____
(4) Net property value changes	(-)	_____
(5) Amount last certified to LPAA (date certified) _____	\$	_____
(6) Current year discrepancies as reported to LPAA	(-)	_____
(7) Items surplused (BF 11's) between certification date and 06/30/2021	(-)	_____
(8) Items purchased (received) between certification date and 06/30/2021	(+)	_____
(9) Amount listed on line 2 B above	(+)	_____
(10) Amount listed on line 3 B above	(-)	_____
(11) Items lost or stolen since last certification to LPAA	(-)	_____
(12) Total movable property at 06/30/2021	\$	_____
(13) Current year acquisitions valued under \$1,000:		
<input type="checkbox"/> have been tagged and reported to property control		
<input type="checkbox"/> have not been tagged and reported to property control		

**\*NOTE: Certification date is defined as the date of the inventory master file listing on the Certification of Annual Property Inventory**

PROPERTY MANAGER - Print Name \_\_\_\_\_

PROPERTY MANAGER - Signature \_\_\_\_\_

ADDRESS \_\_\_\_\_

TELEPHONE \_\_\_\_\_

SECTION HEAD - Print Name \_\_\_\_\_

SECTION HEAD - Signature \_\_\_\_\_

DATE \_\_\_\_\_

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FORM B

DETAIL OF DISCREPANCIES

\_\_\_\_\_
AGENCY (COST CENTER) NAME

Table with 6 columns: Tag No., Class Code, Description, Location, Acquisition Date, Acquisition Cost

Table with 6 columns: Tag No., Class Code, Description, Location, Acquisition Date, Acquisition Cost

Total 1st year discrepancies, 2021 \$ \_\_\_\_\_

Table with 6 columns: Tag No., Class Code, Description, Location, Acquisition Date, Acquisition Cost

Total 2nd year discrepancies, 2020 \$ \_\_\_\_\_

Table with 6 columns: Tag No., Class Code, Description, Location, Acquisition Date, Acquisition Cost

Total 3rd year discrepancies, 2019 \$ \_\_\_\_\_

Table with 6 columns: Tag No., Class Code, Description, Location, Acquisition Date, Acquisition Cost

Total current year discrepancies, 2021 \$ \_\_\_\_\_







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FORM F

ADDITIONAL DISCLOSURE INFORMATION SHEET

\_\_\_\_\_  
AGENCY (COST CENTER) NAME

**DESCRIPTION**

Table with 1 column and 20 rows for description.