



COUNTY OF NEVADA CAPITAL ASSET BUDGET REQUEST

TYPE OF REQUEST:

- Infrastructure Improvements and Preservation
- Building Structures & Improvements - Please identify building: _____
- Land: Rights of Way, Easements & Land Improvements
- Equipment: Technological - *Information Systems approval date* 5/14/2026
- Equipment: Automotive
- Equipment: Office, Furniture & Fixtures
- Equipment: Other:

Fiscal Year: FY 2025/26
Dept Name: Sheriff's Office
Fund: FD1000
SBU: CC20205
Office2: PG1521000
Sub-Service: _____
PCN: _____
Acct Code: _____

IMPORTANCE OF CAPITAL ASSET: Urgent Necessary Desirable

PRIORITY RANKING OF CAPITAL ASSET: _____ out of _____ Total Department Requests

JUSTIFICATION FOR CAPITAL ASSET (Attach additional pages as necessary)

The MX908 device is a critical tool for threat detection and public safety, bridging the gap between lab-grade analysis of unidentified substances and field-ready deployment.

FUNDING SOURCE FOR CAPITAL ASSET

1. Is this grant-funded?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Granting Agency: _____	BOS Reso. # Accepting Grant: _____
		Other funding source: State Asset Forfeiture Funds (FD1680)	
2. What is the general fund and/or other fund balance dollar impact?	<input type="checkbox"/> None <input type="checkbox"/> As follows:		23,123
3. Who will technically own this asset?	<input checked="" type="checkbox"/> County of Nevada <input type="checkbox"/> Granting Agency	Notes regarding ownership:	
<i>Notes regarding funding (including deadlines)</i>			

CAPITAL ASSET ITEMIZED COSTS - Estimated

Item	Quantity	@	Unit Cost	Sales Tax	Shipping	Installation	Other Cost	Total Cost
HP Zbook Fury Gli Mobile Workstation PC	2	@	\$10,619	\$1,885	\$0	\$0	\$0	\$23,123
		@		\$0				\$0
		@		\$0				\$0
		@		\$0				\$0
		@		\$0				\$0
TOTAL:								\$23,123

Please attach documentation (ISSB approval minutes, quotes, etc.)

Prepared by **APPROVED**
 By Georgette Aronow at 11:09 am, May 15, 2026 Date: _____
 Phone: _____

APPROVED BY:
 Dept. Head Signature: _____ Date: _____
 CEO Analyst Signature: _____ Date: _____

CEO Staff use only

Notes: _____ **Initials** _____ **Date** _____

Denied
 Approved \$ _____

Capital Asset Approval # _____