Agency Information	
City/County/State Agency Name	City of Arcade
Other (**If City/County/State not in list**)	
LEA Type	Police Department
Other (**If LEA Type not in list**)	
ORI Number:	GA0780400
Address:	3325 Athens Highway Jefferson, GA 30549
Phone:	706-367-1821
Reporting Officer/Employee	
Name:	Michael Adams
Title:	Chief of Police
Email Address:	m.adams@cityofarcade.org
State Totals Received For Reporting Year	
State Currency (**Calculated Do Not Enter Value**):	**$0.00**
State Expenditures (**Calculated Do Not Enter Value**):	**$0.00**
State Cash on Hand:	**$11,107.53**
Fed Totals Received For Reporting Year	
Fed Currency (**Calculated Do Not Enter Value**):	**$0.00**
Fed Expenditures (**Calculated Do Not Enter Value**):	**$0.00**
Fed Cash on Hand:	

State Forfeited Property

Date Received	Item Description	Statute	Value	Disposition/Distribution of Property	Date of Sale	Gross Income	Net Income	Property Utilization	Date of Destruction

State Forfeited Property (Previous Cycle)

Date Received	Item Description	Statute	Value	Disposition/Distribution of Property	Date of Sale	Gross Income	Net Income	Date of Destruction

State Forfeited Currency

Date Received	Statute	Amount

State Returned Property

Date Returned	Description of Property

State Expenditures

Date	Amount	Purpose

Federal Forfeited Property

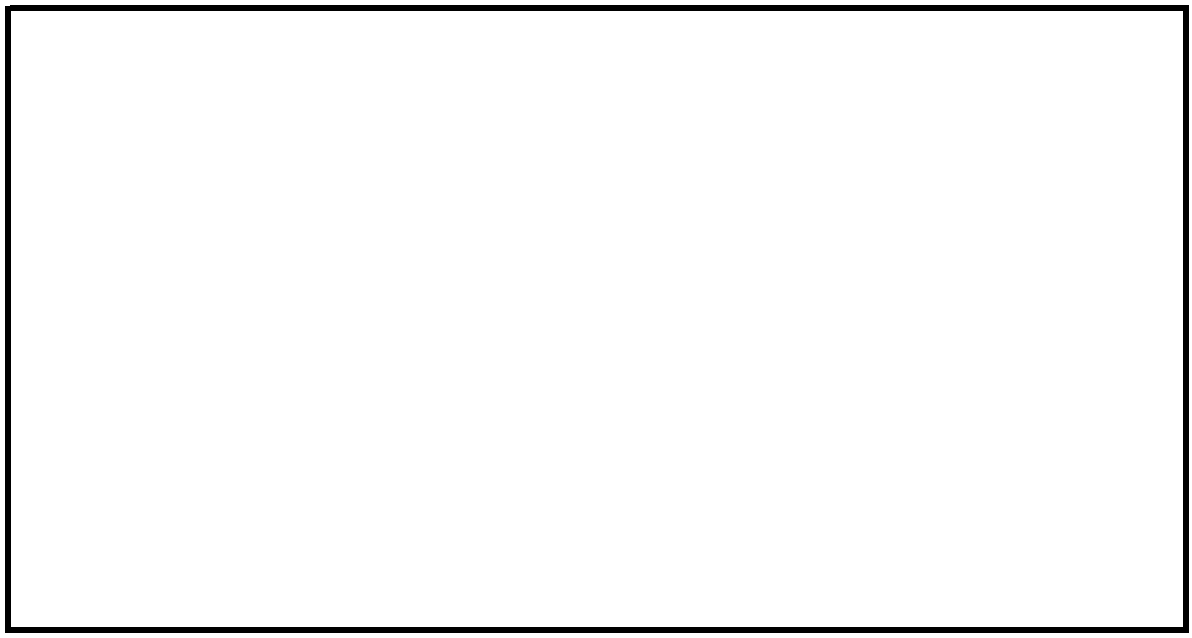
Date Received	Item Description	Statute	Value	Disposition/Distribution of Property	Date of Sale	Gross Income	Net Income	Property Utilization	Date of Destruction

Federal Forfeited Currency

Date Received	Statute	Amount

Federal Expenditures

Date	Amount	Purpose



Prosecuting Attorneys' Council of Georgia

Asset Forfeiture Reporting
Law Enforcement, Multi-Jurisdictional Task Forces, and State Agencies
OCGA 9-16-19(g)(3)(A)

Agency Information

City/County/State Agency Name *	City of Arcade
LEA Type *	Police Department
ORI Number *	GA0780400
Address	3325 AThens Highway Jefferson, GA 30549
Phone *	706-367-1821
Does your agency have assets to report? *	(•) Yes ( ) No

I hereby swear or affirm that the information contained within this report is true and correct to the best of my knowledge and belief.

Reporting Officer/Employee

Electronic Signature /s/ *	Michael Adams
Name *	Michael Adams
Title *	Chief of Police

Download 2024 LEA, MJTF, State Agency Report Spreadsheet

Upload Asset Forfeiture Form *	City_of_Arcade_2024_Asset_Forfeiture_Report_P… 126.04KB PDF Format Only !!!!
Email Address *	m.adams@cityofarcade.org Copy of form in pdf format will be emailed to this address

Governing Political Subdivision (Forms will be emailed to this address)

Email *	m.adams@cityofarcade.org