

**Mississippi Management and Reporting System
Asset Management (Protégé) Security Maintenance Form**

See #2376 Asset Management Security Maintenance Form Procedures for instructions on completing this form.

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|---------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|------|
| Maintenance Action (Select Only One) | User's Name: | |
| | Phone: | Fax: |
| <input type="checkbox"/> Add User <input type="checkbox"/> Update User <input type="checkbox"/> Delete User Effective Date: ___/___/___ | E-mail (required): | |
| | Agency Name: | |
| | OSA Agency Number(s): _____, _____, _____, _____, _____ | |
| Assigned Asset Management User Id (for use when updating or deleting user only) | | |

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| Enter the appropriate Asset Management Security Profile (See #2377 Asset Management Security Profile Groups) | |
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| Authorized Agency Property Officer | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|
| Name (Please Print): | Phone: |
| E-mail (required): | |
| Signature: | Date: |
| Complete and return this form to: MASH@dfa.ms.gov Dept. of Finance and Administration / MMRS 210 East Capitol Street Regions Plaza, Suite 1400 Jackson, MS 39201 Fax Number: 601-359-6551 | FOR MMRS USE ONLY: Processed Date: _____ By: _____ |