|  |
| --- |
| **Serial Number­­:** |
| **Make and Model:** |
| **Equipment Included:**   * Bag :  Yes  No * Charger :  Yes  No * Mouse :  Yes  No   **Other Items:** |

By signing this form, I agree to the following: I am responsible for the equipment or property issued to me; I will use it/them in the manner intended; I will be responsible for any damage done (excluding normal wear and tear); upon separation from the Company, I will return the item(s) issued to me in proper working order (excluding normal wear & tear); I will replace any items issued to me that are damaged or lost at my expense; I authorize a payroll deduction to cover the replacement cost of any item issued to me that is not returned for whatever reason, or is not returned in good working order.

|  |  |  |  |
| --- | --- | --- | --- |
| **EMPLOYEE NAME** |  | **SIGNATURE** |  |
| **DATE** |  | | |