

EQUIPMENT RELEASE FORM

NAME:	
DATE OF RELEASE:	
LOCATION:	
I HAVE RETURNED THE FOLLOWING EQUIPMENT:	
ASSET NAME:	SERIAL NUMBER:
MAKE:	ASSET STATUS:
MODEL:	ASSET ISSUE:
ASSET UNIT CONDITIONS	
- The unit is in good condition	
- The unit's accessories are complete (Main unit, charger, manual and box) By signing this	
document, I am accepting and agreeing to the terms of return of this device	
EMPLOYEE SIGNATURE OVER PRINTED NAME	DATF