

Business Contracts



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EQUIPMENT CHECKOUT AND RESPONSIBILITY FORM

<<Company>>
<<Address1>> <<Address2>>
<<City>>, <<State>> <<PostalCode>>
Phone <<WorkPhone>>

S
CHECKOUT DATE:

Employee Name _____ (Please print)

A

Department / Supervisor _____

Equipment to be checked out to Employee by Company _____

M

Included Software and Licenses _____ (attach additional lists if necessary)

Replacement Value of all Equipment and Software _____

P

Please list any defects, damage or problems with any equipment to be checked out to employee:

Sensitive and Confidential Information

L

All employees, contractors or staff members have the obligation to protect sensitive and confidential information that may

E

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See the product compare chart for which product(s) this document is included in at: <http://www.proposalkit.com/htm/compare5.htm>

Employee Initials _____



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