



Receipt of Office Equipment

Employee Name:

Rafay Ahmed

Designation:

Negotiator

Employee ID:

APD -0106

Department:

WC

Reporting To

Louis Hampton

Date:

02-12-2020

NIC#:

42101-4709828-3

Equipment	Type	QTY.
Laptop /PC <input checked="" type="checkbox"/>	4GB / 6640 2.8 GHz / Lenovo	1
Mouse <input checked="" type="checkbox"/>	Elecom	1
Keyboard <input checked="" type="checkbox"/>	Dell	1
LCD <input checked="" type="checkbox"/>	IBM	1
Headset <input checked="" type="checkbox"/>	Aytech HS PS	1
Others <input checked="" type="checkbox"/>	Power VCA	3
Total Items		8

By signing this form, I agree to the following:

I am responsible for the equipment issued to me; I will use it/them in the manner intended; I will be responsible for any damage done. Upon completion of working from home from the Company, I will return the item(s) issued to me in proper working order.

Furthermore 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.

I hereby acknowledge that I have received the following company property:

Rafay
2/12/20

Employee
Date & Signature

IT Supervisor
Date & Signature

HR
Date & Signature