

Equipment Acknowledgement Form

I acknowledge that I have been issued [equipment] [serial number] by the Company. If I do not return the [equipment] at the time of termination in good repair (minus normal wear and tear) or if I lose or damage said equipment, I agree to allow the company to withhold the fair market value of the equipment from my final paycheck.

EMPLOYEE'S NAME (printed): _____

EMPLOYEE'S SIGNATURE: _____

DATE: _____

WITNESSES BY: _____

DATE: _____