



IT EQUIPMENT AND/OR MATERIALS HANDOVER/RETURN FORM

Employee Name:	
Employee Title:	
Extension #:	
E-mail:	
Department:	
Date:	

Equipment	Property Number	Quantity

I hereby acknowledge that I have received / returned the above mentioned equipment. I understand that this equipment belongs to the Arcicibo Observatory (UCF, YEI, UAGM) and it was or will be under my possession to carry out the assigned tasks. I hereby assure that I took care/ will take care of the equipment to the best possible context.

Employee's Signature	Authorized Signature
Date	Date