

Receipt of IT Related Equipment

Please fill the following information and submit this form:

Name: _____

Designation: _____

Department: _____

Attached with: _____

Device	Yes/No	Model No.	Serial no. / Specification
Computer			S/N: Specification:
Laptop			S/N: Specification:
Printer			
UPS			
Photocopier			
Web cam			
Wi-Fi Dongle			
Speaker			
Pen Drive			
Headphone			
External HDD			
Router			

I confirm that the above equipment has been issued to me in proper working condition. I shall be responsible for it and return it to IT Department on Transfer / Retirement / Reliving.

Signatures with date:

Applicant: _____

HoD-IT: _____