INTERIM EQUIPMENT ASSIGNMENT FORM

The support staff equipment, which is described below, is currently assigned by the AOC to __________________________, __________________________ whose employment will/did terminate on __________________________. It is my intention to hire a replacement as soon as possible. I understand that until such time as a replacement is hired, it is necessary for me to assume responsibility for that equipment. It is also my understanding that as soon as that replacement has been hired, the listed equipment will be reassigned by the AOC to that new staff person who will, at that time, assume responsibility.

COMPUTER - Serial No. ________________

MONITOR - Serial No. ________________

PRINTER - Serial No. ________________

FAX MACHINE - Serial No. ________________

COPIER - Serial No. ________________

TYPEWRITER - Serial No. ________________

TRANScriBER - Serial No. ________________

ANSWER PHONE - Serial No. ________________

SCANNER - Serial No. ________________

SHREDDER - Serial No. ________________

LAPTOP - Serial No. ________________

I hereby assume responsibility for the above listed support staff equipment on this the ______ day of __________________, __________.

__________________________________

The above Interim Equipment Assignment is hereby made effective the date hereinabove set forth.

__________________________________

RICK D. PATT, Acting Administrative Director