

UNIVERSITY of NORTH TEXAS
University Property Custody Receipt

Date: _____

(Name of Account with Inventory Accountability)

(Account No.)

I, the undersigned, request authorization to remove from the campus of University of North Texas the below listed equipment. Removal of said property is for the following purpose(s): _____

_____ To perform university projects, work, and research at home.

I further certify that:

- 1) the purpose(s) previously stated constitute official business of University of North Texas;
- 2) upon removing said property, I assume pecuniary responsibility during the temporary removal period;
- 3) appropriate insurance coverage has been provided (optional);
- 4) the below listed property will be used at the following location:

(Complete street or mailing address)

and,

5) this equipment will first be removed from the campus on _____ and returned to the campus on _____

(Date)

(Name)

(Title)

(Employee ID Number)

(Department)

(Signature)

(Date of Signature)

Inventory No.

Description

Serial No.

Inventory Value

1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____
4	_____	_____	_____

(Please attach an additional sheet(s) if necessary)

Approval: _____
(Printed Name of Department Head)

(Signature)

(Date)

Where agency property is lost, stolen, deteriorated, damaged or destroyed as a result of an intentional wrongful act or of a negligent act of any state official or employee, such person shall be pecuniarily liable to the state for the loss thus sustained by the state. (Texas Gov't Code Ann. sec. 403.275 (Vernon Supp. 1993))

Property Custody Return Receipt

Return to: _____
(Signature of Designated Authority)

(Date)