

CUSTODY RECEIPT

DATE: _____

TO: Property Control, UL Lafayette

FROM: _____
(Name of appropriate department head or director)

The numbered state property items listed below are hereby designated as "portable equipment" for a period of one fiscal year (July 20__ through June 20__). In the interest of facilitating job performance, they may be moved among work locations by the designated user for purposes of university teaching, research and other academic activities sanctioned by the University. They may not be used for paid consulting or other personal activities not authorized by the University. Their inventory location will be recorded as the campus office for the user listed below.

The user hereby agrees to make these items available for inventory if requested by the Property Control Office or by the administration of the user's department. The user further agrees to promptly surrender these items to the departmental administration along with any other University property under the user's purview, in the event that the user's employment with the University is terminated. The user also agrees to assume responsibility for maintenance of these items and for providing reasonable protection against damage or theft. Second party assignment of the designated user's responsibility is not permitted.

Abuse of this agreement by the user may result in disqualification of these items as "portable", removal of these items from control of this user, or punitive action against the user under state law.

This agreement will be reviewed, at minimum, on an annual basis. Renewal of the agreement may be granted provided there is sufficient evidence of continued need.

The University will enforce LAC 34:VII.305E, which allows full payment to the University for damages by the user for any property lost through negligence. If the property is located, the University will reimburse payments made for lost equipment.

<u>Property Tag#</u>	<u>Description</u>
_____	_____
_____	_____
_____	_____

Designated User Information:

(name, title, department)

(office location bldg & room#)

Signatures:

(Designated User)

(Department Head or Dean)

(Appropriate Vice President)