



RENTAL PHOTOCOPYING MACHINE VERIFICATION FORM

Name of the custodian: _____

Directorate: _____

Head Office or District Office: _____

Building Name: _____

No	Asset Description	Serial No.	Room No.	Date of verification	Comment
1.					
2.					
3					
4.					
5.					

NB: 1. What is the contract starting date? _____

2. What is the contract ending date? _____

3. If point 2 is expired have you renewed the contract? _____

Verification conducted by:

Name and Surname _____

Signature _____

Date: _____