Attachment II

NON-UNIVERSITY FUNCTION
EQUIPMENT LOAN REQUEST

TO: DIRECTOR, MATERIALS MANAGEMENT
FROM: _____ _____
Name of Organization Phone No.

_____ _____
Name of Person Making Request Date

(1) This is a request for loan of:

Quantity / Inventory No.	Description

The borrower assumes responsibility for replacing lost or stolen equipment and for repairs to damaged equipment as determined by Materials Management.

(2) Location at which this equipment is to be used:

_____

(3) Purpose for which this equipment is needed:

_____

(4) Organization will pick up this equipment: _____
Time & Date

and return it to place of pick up: _____
Time & Date

_____

This space for official use only
There is no conflict at this time.
There is a conflict at this time.
Type of Conflict _____
Approval Recommended
Approval Not Recommended _____
Materials Management Director Date

Approved
Disapproved _____
Vice President for Finance and Support Services Date