P117A

City of Topeka
Office Inventory

Name: _____ **Date:** _____

Title: _____

Office Location: _____

Item	Description	Serial #	Date Recorded

I, _____, hereby certify that the items listed above were present in my office on the date indicated. If any of the assets listed above are disposed of, I will make note on this form. Likewise, if additional items are purchased, a notation will be made. I understand a copy of this inventory will be kept in my personnel file in the Human Resources Department. I will be accountable for items entrusted to me when I leave City employment.

_____
(Signature)

I, _____, hereby certify that the items listed above were present in this office on the date indicated above.

_____

(Signature)