



Company Asset Accountability Form

In accepting the assets assigned to me, I hereby agree to the following conditions:

- I understand that I am solely responsible for the company assets while in my possession.
- I shall only use the company assets for iPloy's operational related purposes.
- I shall keep the company assets in good working order and will notify the IT Team and/or Team Leader of any defect or malfunction during my use.
- I shall not install and/or download any unauthorized software and/or applications.
- I shall not allow the company assets to be used by an unauthorized person. I assume the responsibility for the actions of others while using the computer.
- If the company asset/s is/are lost, stolen or damaged, the incident must be reported to the IT Team and/or Team Leader within 24 hours.
- I agree to pay all the costs or their respective costs associated with the damage, negligence or misuse, loss of, or theft of the company asset/s.
- I understand that a violation of this agreement may result in further discipline up to and including termination of employment and/or legal action.

Assigned Assets (Based on Assettigger):

Report Check-Out by Persons		iPloy, OPC	
Person: Rodelene Antalan Rogas			
Employee ID	2278	Alias	Rose Rogas
Name	Rodelene Antalan Rogas	Email	Rose.Rogas@adapthealth.com
Site	ACCT	Department	Patient Pay
Location	D75 Workstation		
Asset Tag ID	Description	Brand	Model
IPLOYAVR636	Generic AVR	Secure	Secure
IPLOYDLL116	Dell MFF i3	Dell	Optiplex 3050 MFF
IPLOYHS1104	USB Headset	Plantronics	Blackwire C3220
IPLOYDLLMT27	Dell Monitor	Dell	E1916H
IPLOYDLLMT21-1	Dell Monitor	Dell	E1916H
5 assets			

Additional Assigned Assets:

Asset Tag ID	Description	Brand	Model
IPLOYKB433	USB Keyboard	A4tech	None
IPLOYMS585	USB Mouse	A4tech	None
	None	None	None
	None	None	None
	None	None	None
	None	None	None

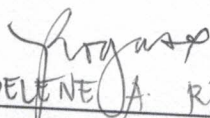
Purpose/Note	Existing assign assets - for Company Assets Accountability Form
	Total assets assigned: 7

Company Asset Cost:

Company Asset	Total Cost	Payable per Pay	Pay Period
System Unit	Php 45,000.00	Php 3,000.00	Payable for 15 pay period
Monitor	Php 10,000.00	Php 2,000.00	Payable for 5 pay period
Headset	Php 2,500.00	Php 850.00	Payable for 3 pay period
Keyboard	Php 500.00	Php 500.00	Payable for 1 pay period
Mouse	Php 500.00	Php 500.00	Payable for 1 pay period
Webcam	Php 1,500.00	Php 750.00	Payable for 2 pay period
AVR	Php 500.00	Php 500.00	Payable for 1 pay period

Note: Depreciation is subject for top management's approval.

By signing this Company Asset Accountability Form, I hereby acknowledge that I have completely read and fully understand all the provisions of this form and should not hold the company liable for any loss or damages of my assets and accountabilities while the items are in my possession.


 RODELENE A. ROGAS

Employee's Printed Name and Signature

05-03-2023

Date

Remarks Upon Releasing
Are the components working? YES / NO
If NO, please describe the damage:

Remarks Upon Return (Admin Use Only)
Are the components working? YES / NO
If NO, please describe the damage:

Admin Use Only	
Check Out Date: 05/02/23	IT Personnel Signature: Jonathan Gabriel
Check In Date: _____	IT Personnel Signature: _____