







## 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 Assettiger):

Person: Starky Lyell Operario Geli						
Employee ID	2826	Alias	Steve Geli			
Name	Starky Lyell Operario Geli	Email	steve.geli@adapthealth.com			
Site	ACCT	Department	PAP Compliance			
Location	B77 Workstation	Region	Adapt PAP Compliance			
Asset Tag ID	Category	Brand	Model	Check-out Date	Check-out Notes	Asset Photo
IPLOYDLL98	System Unit	Dell	Optiplex 3050 MFF	05/21/2024	Transfer station	
IPLOYAVR218	AVR			05/21/2024	Transfer station	
ISSDLLMT137	Monitor	Dell	E2216H	05/21/2024	Transfer station	
ISSDLLMT464	Monitor	Dell	E2216H	05/21/2024	Transfer station	
IPLOYCAM239	Webcam	A4tech	PK-635G	05/21/2024	Transfer station	
IPLOYHS1331	Headset	Plantronics	Blackwire C3220	03/22/2022		
<b>6 assets</b>						

**Additional Assigned Assets:**

Asset Tag ID	Description	Brand	Model
Dell	USB Keyboard ▾	Dell ▾	None ▾
Dell	USB Mouse ▾	Dell ▾	None ▾
		None ▾	None ▾
		None ▾	None ▾

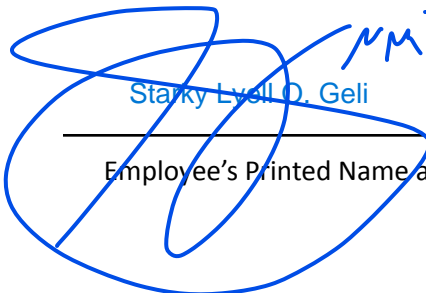
Purpose/Note	Transfer Station  Total assign assets: 8
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**Company Asset Cost:**

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.


  
 Starkey Lyell O. Geli
 

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 Employee's Printed Name and Signature

05/23/2024
 

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 Date

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

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

Admin Use Only	
Check Out Date: <u>May 23, 2024</u>	IT Personnel Signature: <u>Jonathan Gabriel</u>
Check In Date: _____	IT Personnel Signature: _____