



NAME: \_\_\_\_\_ EMPLOYEE NO: \_\_\_\_\_ DATE: \_\_\_\_\_

				Issue		Return	
Description	Qty	ID No.	Size	Initial	Date	Initial	Date
Job Shirt							
Tee Shirt							
Ball Cap							
Class B Shirt							
Class B Pant							
Badge							
EMS Jacket							
Alpha Pager							

All District equipment is subject to return upon demand.

The equipment and uniform clothing described above is assigned to the recipient named for use in District emergency services operations and those activities directly associated with an authorized Clark County Fire & Rescue activity.

I, \_\_\_\_\_, understand that I may be responsible for any costs for repair of damages incurred or replacement due to loss or theft of the above items while in my possession. I agree to return this equipment on request or termination of my affiliation with the department.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

A copy of this form will be provided to the member upon issuance and return of any items.