



**San Joaquin County Office of Education**

James A. Mousalimas, County Superintendent of Schools

**PROPERTY ASSIGNMENT RETURN FORM**

\_\_\_\_\_  
Employee ID #

\_\_\_\_\_  
Borrower's Name

\_\_\_\_\_  
Department

\_\_\_\_\_  
Description of Equipment

\_\_\_\_\_  
Serial Number

\_\_\_\_\_  
Return Date

\_\_\_\_\_  
Condition of Equipment

\_\_\_\_\_  
Signature of Employee Accepting Return

\_\_\_\_\_  
Date Returned

**Note:**

**The employee returning this equipment should retain this signed document as proof of return for the above listed equipment.**