

ALARM CODE, KEY, AND KEY FOB RECEIPT

I have received the following for the _____ Library, a Unit of the Uncle Remus Regional Library System.

Alarm Code No: _____

Keys

Key Fob No: _____

I have read and signed the Alarm Code, Key, Key Fob and Passwords acknowledgement form.

I understand and acknowledge that if I lose a key or key fob, I am to notify my immediate supervisor immediately and that I am responsible to pay the cost of having the appropriate locks re-keyed and replacement costs.

I understand and acknowledge that at the end of my employment, my keys, and key fob must be returned to my direct supervisor before my last paycheck can be released. If I fail to return my keys within 30 days of the end of my employment, I am responsible to pay the cost of having the appropriate locks re-keyed and the cost of replacement keys. If I fail to return my key fob within 30 days of the end of my employment, I am responsible to pay a \$75.00 replacement fee. Any and all costs will be deducted from my final paycheck.

Employee Name – Please Print

Employee Signature

Date Received

Library Manager

Date keys and key fob returned: _____

Date Charles notified re alarm code: _____