

DEPARTMENT OF HOMELAND SECURITY
CUSTODY RECEIPT FOR PERSONAL PROPERTY/PROPERTY PASS

DESCRIPTION OF PROPERTY *(Include make, model, serial number, barcode number)*

PROPERTY ISSUED TO

NAME (LAST, FIRST, MI)		ORGANIZATION
BUILDING / ROOM	PHONE NUMBER	E-MAIL ADDRESS
PROPERTY OWNER (Choose Owner from drop-down list)		EXPIRATION DATE

FOR GOVERNMENT-OWNED PROPERTY

The property recipient will be relieved of accountability for this property by surrendering it to the Property Custodian in exchange for this receipt upon demand, transfer, or separation from the Government. The property must be surrendered to the Department immediately upon request.

I understand that I am personally responsible for the property identified above, and that I may be held pecuniarily liable for its loss or damage, unless otherwise relieved of responsibility by Board of Survey action.

I understand that the property is FOR OFFICIAL USE ONLY and it may not be transferred except by return to or approval of the issuing official.

SIGNATURE OF PROPERTY RECIPIENT	DATE
ISSUING OFFICIAL <i>(Typed or Printed Name & Signature)</i>	DATE

PROPERTY MAY BE REMOVED FROM THE PREMISES? YES (Choose YES or NO from drop-down list)

REMOVAL AUTHORIZED/RESTRICTED BY

SIGNATURE OF AUTHORIZING OFFICIAL _____

DHS Form 560-1 (3/05)

Distribution of Copies:

- Original – Issuing Official
- Copy 1 – Office of Asset Management/Administrative Services
- Copy 2 – Property Recipient