

Key Receipt

Name (Print) _____

Date: _____

Key Number _____

(One key per receipt)

I acknowledge receiving the key with the number shown above. I agree to all of the requirements of the University Lock & Key Policy, including those provisions that state that I may also be charged for the lost key and the costs of re-keying/re-coring locks as a result of the loss of the key. I also agree not to loan, transfer, give possession of, misuse, or alter the key. I further agree not to cause, allow, or contribute to making of any unauthorized copies of the key.

The following applies to CMU Employees:

If I do not return this key before the end of my last day of work, **I authorize CMU to deduct from my final paycheck**

- [Circle one] \$500 grand master
- \$200 building master
- \$100 building sub-master
- \$50 other

Signature: _____ Personnel # _____

Unit Key Coordinator (print AND sign) _____

Date: _____

Keys Received from Lock Shop

RETURN FORM TO FM LOCK SHOP-COMBINED SERVICES BLDG