

Fixed Asset Return Form

Employee Name

Employee ID

Department

Return Date

Returned Asset Details

Asset Name	Asset Tag/Serial No.	Condition	Remarks
<input type="text"/>	<input type="text"/>	<div>Select</div>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<div>Select</div>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<div>Select</div>	<input type="text"/>

Additional Comments

Employee Signature

Asset Manager / Supervisor

Date

Important Notes

- All returned assets must be inspected for their condition at return time.
- Damages or missing accessories must be reported immediately.
- This form serves as official record of asset return for audit and inventory purposes.
- Incomplete forms may result in delays in processing the return.