



# Columbia Square PROPERTY REMOVAL PASS

THE BEARER OF THIS PASS:

(PRINT NAME) THE

ITEMS ARE THE PROPERTY OF:

(NAME/ORGANIZATION)		
DATE OF REMOVAL:	DATE MATERIAL MUST BE RETURNED	RETURN NOT REQUIRED
		(INITIAL)
<b># OF ITEMS</b>	<b>DESCRIPTION OF THE ITEMS TO BE REMOVED</b>	<b>SERIAL # (IF ANY)</b>

<b>REMOVAL AUTHORIZED BY:</b>	<b>INSTRUCTIONS:</b>
(SIGNATURE)	1. ALL SECTIONS MUST BE FULLY COMPLETED
<b>PRINT NAME</b>	2. PERSONS AUTHORIZING MUST COMPLETE THE SHADED AREAS IN ITS ENTIRETY
<b>TITLE</b>	<b>3. KEEP COPY FOR YOUR RECORDS</b>
<b>TELEPHONE #</b>	
<b>DEPARTMENT:</b>	<b>DATE:</b>
	4. PRESENT THIS FORM AND ALL MATERIAL AT THE LOBBY SECURITY DESK FOR PROCESSING.
<b>REMOVAL VERIFIED BY SECURITY:</b>	
SIGNATURE	
<b>TIME:</b>	<b>DATE: COMMENTS:</b>

[common/buildinginformation/propertyremovalpass](http://common/buildinginformation/propertyremovalpass)