



Document Title	IT Equipment Handover Form	Rev. No	01
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- | | | |
|--|--|---|
| <input type="checkbox"/> GINTELL (M) SDN BHD | <input type="checkbox"/> GINTELL (T) CO. LTD | <input type="checkbox"/> ERACARE VIETNAM CO. LTD |
| <input type="checkbox"/> GINTELL (BORNEO) SDN BHD | <input type="checkbox"/> GINTELL (S) PTE LTD | <input type="checkbox"/> ERACARE PHILIPPINES INC. |
| <input type="checkbox"/> GINTELL REST N GO SDN BHD | <input type="checkbox"/> GINTELL (B) SDN BHD | <input type="checkbox"/> _____ |

Person request : _____ Position _____

Department : _____

Software:

- | | | |
|--|--|------------------------------------|
| <input type="checkbox"/> Microsoft Product | <input type="checkbox"/> Adobe Product | <input type="checkbox"/> Antivirus |
| <input type="checkbox"/> _____ | | |

Hardware:

- | | | | | |
|----------------------------------|-----------------------------------|----------------------------------|----------------------------------|---|
| <input type="checkbox"/> PC Set | <input type="checkbox"/> Notebook | <input type="checkbox"/> CPU | <input type="checkbox"/> Monitor | <input type="checkbox"/> Keyboard/Mouse |
| <input type="checkbox"/> Printer | <input type="checkbox"/> CCTV | <input type="checkbox"/> Network | <input type="checkbox"/> _____ | |

Remark:

IT Department	Staff
Signature:	Signature:
Prepared by:	Received by:
Date:	Date:
	Item in good condition <input type="checkbox"/>