

Temporary Issue Receipt		
<i>For detailed instructions see CAPR 174-1, CAP Property Management</i>		
I acknowledge receipt of and responsibility for the items described below and will return them upon demand or when no longer needed in the performance of my CAP duties.		
Issued to: Signature		Issued By:
Issued to: Name	Address:	
CAPID:	Phone number:	
Date of Issue:		Return Date:
CAP Property Tag Number:	Description of Item	Quantity
CAP Form 37, July 2009 Previous editions will not be used. OPR: CAPNHQ/LGS		

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