

HAND RECEIPT FOR EXPENDABLE OR NON-EXPENDABLE ITEMS <i>(DMNA Reg 700-1)</i>		DATE OF ISSUE:
ISSUED BY:	ISSUED TO:	DATE ITEMS TO BE RETURNED <i>(if applicable)</i>
ITEM <i>(Include State Property Number, Serial Number, Model Number, Description, etc. as applicable)</i>		QUANTITY
I ACKNOWLEDGE RECEIPT OF THE ABOVE ITEMS	I ACKNOWLEDGE THE ABOVE ITEMS WERE RETURNED ON DATE INDICATED	
SIGNATURE OF RECIPIENT:	SIGNATURE OF ISSUER OR AUTHORIZED REPRESENTATIVE:	DATE:

DMNA FORM 95 (1 SEPTEMBER 2000)

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