Statement of

Physical Custody of LESO Program Property

| Law Enforcement Agency Information: |
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| Name: |
| Address: |
| Phone Number: |
| LESO Property issued to: |
| Name: (LAST) |
| (FIRST) |
| LESO Property Description: |
| NSN: |
| MAKE: |
| ITEM NOMENCLATURE: |
| MODEL: |
| SERIAL NUMBER: |
| ITEM UNIT COST: |
| QTY OF ITEM: |
| Statement of Physical Custody: |
| I am a Law Enforcement Officer of the aforementioned Law Enforcement Agency. I have physical custody of the item(s) listed above and accept personal responsibility for the property. I further understand that failure on my part to exercise responsibility for the care and protection of the item(s) listed above could result in pecuniary liability. |
| PRINTED NAME: |
| SIGNATURE: DATE: |