Contract to Borrow CFE Lab Equipment

Name	
Street address	
City, State Zip	
Cell phone	Home phone
Tartan Card #	
Email	
Instrument Manufacturer / Mc	odel#
Serial # Condition	
I agree to return this instrumer	nt by
I agree to pay in full, replacemed date in the same condition it w	ent of a new identical instrument if this is not returned by the due vas given to me.
Signed	
Print Name	
Date	