

- I agree to pay the amount of \$ 120.00 to replace the ASD Small Spectralon.
- I agree to pay the amount of \$ 220.00 to replace the ASD Pistol Grip.
- I agree to pay the amount of \$ 20.00 to replace the ASD Binder.
- I agree to pay the amount of \$ 20.00 to replace the ASD Manual.
- I agree to pay the amount of \$ 840.00 to replace the ASD Foroptics 1 degree.
- I agree to pay the amount of \$ 840.00 to replace the ASD Foroptics 8 degree.
- I agree to pay the amount of \$ 800.00 to replace the ASD Foroptics 180 degree.
- I agree to pay the amount of \$ 280.00 to replace the ASD Pistol Grip w/ SS.
- I agree to pay the amount of \$ 180.00 to replace the ASD Manfrotto Tripod.
- I agree to pay the amount of \$ 42.00 to replace the ASD SunPac Tripod.
- I agree to pay the amount of \$ 240.00 to replace the ASD Power Supply.
- I agree to pay the amount of \$ 300.00 to replace the ASD Battery Charger.
- I agree to pay the amount of \$ 220.00 to replace the ASD 12 v. Battery.
- I agree to pay the amount of \$ 500.00 to replace the ASD Ergonomic Pro Pack.

PURPOSE FOR BORROWING: _____

BORROWER SIGNATURE: _____ DATE: ____ / ____ / ____

WITNESS NAME: _____

WITNESS SIGNATURE: _____ DATE: ____ / ____ / ____



This section will be filled out when you return the item.

BORROWER SIGNATURE: _____ DATE: ____ / ____ / ____

WITNESS SIGNATURE: _____ DATE: ____ / ____ / ____