Vendor Exit Clearance Form

Vendor Name			
Company Name			
Department			
Date of Exit			
Supervisor Name			
Reason for Exit			
Todos Hor Zale			
Clearance Items			
Item	Issued	Returned	Remarks
Access Card			
Company Laptop/Device Documents/Files			
Other			
Comments			
Vendor Signature			
Date			
Supervisor Signature			
Date			

Admin/HR Signature			
Date			