



Attestation Form for Issued Equipment

Vestige Personal Alert System Device

LifeWays issues select employees their own Vestige™ Persa (Personal Alert System Device). By request from LifeWays administration or upon separation, the undersigned employee agrees to immediately return this device to their supervisor or designee. Failure to do so will subject the employee to pay the replacement cost of the device.

Device Information

Name of Department Issuing Device:

Device # (Top [ME] Number):

Issued By (Print Name):

Date:

Employee Acknowledgement of Receipt

Signature: _____

Date: _____

Please return original to:

Jon Johnston
Safety Management Administrator
Governance Office