

SPOKANE GOP

SPOKANE COUNTY REPUBLICAN CENTRAL COMMITTEE

Key/Passcode Authorization Form SCRCC ACCESS TO BUILDING AND STORAGE UNIT

Name: _____ Date Submitted: _____
District#: _____ Sub District #: _____
Precinct #: _____
DISTRICT LEADER NAME: _____

Please email the report to the Vice Chair (vchair@spokanegop.com)

Reason for needing a key or passcode:

Areas needing access:

To secure the building and prevent misuse, the Key/Passcode authorization form is necessary for controlling the numbers of keys/passcodes given out. The key/passcode holder is personally responsible for his/her key/passcode. Please initial below

_____ Do not loan your key/passcode to anyone or duplicate your key/passcode. If you are found loaning or misusing your key/passcode will be revoked.

_____ The key/passcode holder is responsible for requesting the use of the facility for any activity that is not regularly on the calendar. Please ensure you are responsible for securing the building when you leave and turn off the lights.

_____ Repeatedly leaving doors unlocked or leaving things in disarray may result in the termination of your key/passcode privilege.

_____ GOP equipment is not to be loaned/borrowed outside the GOP facility and grounds.

I have read the key/passcode form and accept full responsibility for the key/passcode issued to me. I am personally responsible to pay for rekeying or re-pass coding if the number gets out because I am responsible with what has been entrusted to me. I will return the key/passcode when my responsibilities end or it is required of me.

Signature of Requestor Date

Signature of Authorizer Date