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## **EQUIPMENT RETURN AND FINANCIAL RESPONSIBILITY FORM**

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If you got your holter monitor at Cleveland Clinic's main campus, please return it to:

**Cleveland Clinic Arrhythmia Monitoring Laboratory, J2-2  
9500 Euclid Avenue, Cleveland, Ohio, 44195**

If you got your holter monitor at a Cleveland Clinic regional location, you must return the recorder to the same location.

### **Your signature below acknowledges that:**

1. You received:

Holter monitor       Pouch       Lanyard

2. You accept the responsibility to return the Holter monitor recorder and all other equipment, undamaged and in its original working condition, immediately after the recording period is complete.

3. You clearly understand that if you do not return the Holter monitor recorder and all other equipment, you will be responsible for repaying the cost of all missing equipment.

**Name (Print Clearly):** \_\_\_\_\_

**Cleveland Clinic #** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_