DATE (MM/DD/YY):

CHECKED BY: _____ **RECEIVED BY:**_____

DONE?		Computer ON?	Mouse Light ON?	LCD Monitor ON?	Touchpanel Ready?	Laptop Cables OK?	Mics in Drawer?	Mic Batteries Replaced?	Hallway TVs ON?	Hallway Alarms ON?	NOTES
	BMC 1.108A										
	BMC 2.408										
	BMC 3.378A										
	BMC 4.378A										
	BMC 5.102										
	BMC 5.208										
	BMC 5.212										