

OFFICE/FUNCTION	CLEARED BY: (Printed Name and Signature)	DATE	PHONE
1. SECURITY			
a. CD-43 or other official identification HCHB - Rm.# 1033	-----		
b. Door Keys and/or Electronic Door Key Cards HCHB - Rm.# 1033	-----		
c. Investigative Credential and Badge HCHB - Rm.# 1067	-----		
d. Security Debriefing/Courier Authorization, CD-75 HCHB - Rm.# 1033 Employees with Special Access HCHB - Rm.# 1521	-----		
e. Escape Hood Returns HCHB - Rm.# 1033	-----		
2. INFORMATION TECHNOLOGY ACCOUNTS			
<p align="center">HEAT TICKET</p> <p><i>A HEAT Ticket will be submitted for all separated employees. This will cover all OS IT Account.</i></p> <p><i>Note: See Your TPOC or Phone Rep for Signature</i></p>	-----		
3. ACCOUNTABLE PROPERTY			
a. Laptop/Computer in Home	-----		
b. Blackberry/Other PDA	-----		
c. Cell Phone	-----		
d. Other - List Items	-----		
4. ACQUISITION MANAGEMENT			
Purchase Card HCHB - Rm.# 6520	-----		
5. ADMINISTRATIVE SERVICES			
a. Metro Subsidy HCHB - Rm.# 2865	-----		

OFFICE/FUNCTION	CLEARED BY: (Printed Name and Signature)	DATE	PHONE
b. Library HCHB – Rm.# 7046	-----		
c. Library HCHB – Rm.# 1898	-----		
d. Passports HCHB – Rm.# 2062	-----		
e. Parking HCHB – Rm.# 1323	-----		
f. Travel Advance HCHB – Rm.# 2062	-----		
g. Travel Card HCHB – Rm.# 2062	-----		
6. EMPLOYEE'S IMMEDIATE OFFICE			
a. Continued Service Agreements (i.e. Student Loan Repayment, Recruitment Bonus, etc)	-----		
b. Timekeeper Certification – T&A Coded Final (if employee is leaving DOC)	-----		
c. T&A Access Terminated	-----		
SECTION III. EMPLOYEE CERTIFICATION			
<p>I certify that, except as otherwise indicated, I have no Government property, records or documents, including classified material issued or furnished by the Department of Commerce or reproduced by me, and I am not otherwise indebted to the United States Government.</p>			
<p>I certify that I have reviewed all the non-record documents (defined in Department Administrative Order (DAO) 205-3) that I plan to remove from the Department. None of these documents contain national security information or other information afforded protection under various statutes or regulations, such as privacy act information or trade secrets; related to any pending or contemplated civil, criminal, or administrative proceeding or other program activity where their release could prejudice the matter, if removed, would hinder the efficient continued functioning of an office or my successor; if removed, would diminish the records or other documentary information needed for the official business of the Department; if removed, would violate the confidentiality of any interest protected by law, such as national security, privacy, trade secrets; if removed, would exceed normal administrative economies (i.e., impose an unreasonable cost or burden created by copying or removing the materials from the building); or if removed, would unnecessarily expose, or risk exposing, to the public any internal deliberations, opinions, legal or policy advice, law enforcement materials, or other professional work-product of any office or employee of the Department. In addition, I understand that I must obtain clearance from the appropriate official possessing authority under Section 4 of DAO 205-12 before I will be permitted to remove any documents that would not normally be released to a third party under the Freedom of Information Act.</p>			
SIGNATURE	DATE		

SECTION IV. SUPERVISOR CERTIFICATION

Note to supervisor: Your failure to comply with the requirements of CD-126, Separation Clearance Certificate and/or the policies as stated in DAO 202-299, Clearance of Employee Accountability, may result in disciplinary action.

I certify that the employee has personally cleared each office as indicated in Section II of this form as well as any other office identified in the supplemental clearance procedures.

Employee has not cleared as indicated above and I have not certified the employee's time and attendance record. (Note: Supervisor must notify the servicing HR office to initiate debt collection.)

SIGNATURE (Print Name and Sign)

DATE

SECTION V. SERVICING HR OFFICE (Check appropriate response)

I acknowledged receipt of the CD-126. This form was was not completed in its entirety. Action will be taken to collect the debt.

7. HUMAN RESOURCES

OFFICE/FUNCTION	CLEARED BY: (Printed Name and Signature)	DATE	PHONE
a. Receipt of Lump Sum Leave Form			
b. Receipt of Leave Audit Form			

SIGNATURE

DATE