

MISSING, DAMAGED OR STOLEN PROPERTY REPORT

NOTE: If property has been stolen or is lost, destroyed or damaged as a result of negligence, this form should be completed and sent to the Office of the Attorney General within five (5) business days of discovery.

Name of agency / institution	Agency no.
------------------------------	------------

Place of occurrence	City	County
Police agency notified	Police report number	Disposal code
		Estimated value at date of loss


SERIAL NUMBER(S)	PURCHASE DATE	PURCHASE VALUE

STATE PROPERTY NUMBER	COMPONENT NUMBER	DESCRIPTION	LOCATION

Person(s) responsible for asset(s)	Property Manager name	Property Manager phone
Report in detail (including what security measures were in place at the time.)		

Please check one box.

- | | |
|--|--|
| <input type="checkbox"/> Our investigation of the circumstances surrounding the state property listed herein indicates reasonable cause to believe that the loss, destruction, or damage to this property was through the negligence of the person(s) charged with the care and custody of this property. | <input type="checkbox"/> Our investigation of the circumstances surrounding the state property listed herein indicates reasonable cause to believe that the loss, destruction, or damage to this property was not through the negligence of the person(s) charged with the care and custody of this property. |
|--|--|

This form should be signed and dated by the agency/institution head or designated representative. If a designated representative completes this form, the rank of that individual should be greater than that of the property manager.	
	Date
Printed name and title	