

STATEMENT OF MISSING, LOST OR STOLEN PROPERTY

From: Responsible Officer _____
Facility _____
Account Number _____

Quantity _____ **I.D. Number** _____

Description _____ **Decal Number** _____

Serial Number _____ **Unit Value** _____

Total Value _____ **Location** _____

Circumstances Surrounding Loss:

What Action Have You Taken to Locate Missing Equipment?

What Action Have You Taken to Prevent a Recurrence?

Signature: _____

Date: _____

