



## Form A

### Lost/Theft Form

Property Control

*This form should be completed by the fiscal officer and submitted to Property Control.*

Fiscal Officer: \_\_\_\_\_

Extension: \_\_\_\_\_

Department: \_\_\_\_\_

Location: \_\_\_\_\_

End User: \_\_\_\_\_

UID: 90

*Please complete the information in the table below for items that have been lost or stolen.*

	Inventory Tag #	Description	Date Acquired	Origination Cost	Date Last Seen
1					
2					
3					
4					
5					

Police Report Number: \_\_\_\_\_

Date Filed: \_\_\_\_\_

*Note: This form cannot be submitted without a lost/theft police report.*

Were the following steps taken to locate the property? Please circle Y (yes) or N (no).

- |  |       |
|--|-------|
| 1. Checked every location under Fiscal Officer's stewardship?                                    | Y / N |
| 2. Involved all staff (Full/Part-time, Extra-Help, Student Workers, etc.) with search of assets? | Y / N |
| 3. Searched all past records (i.e. emails, internal records-hard copies, etc.)?                  | Y / N |
| 4. Searched all cabinets, storage rooms, classrooms and offices?                                 | Y / N |
| 5. Has the Property Control Dept. assisted in the search?  | Y / N |

#### **Steps to take to prevent future Missing Inventory Assets**

1. Designate KNOWLEDGEABLE full-time staff to handle all inventory matters.
2. Notify Property Control of designated knowledgeable staff chosen to handle all inventory matters.
3. Accurately complete Inter-Departmental Equipment Transfer Form C & submit to Property Control.
4. Make copies of all forms and paperwork for your internal record keeping.
5. Do not leave portable items (iPads & Laptops) out in the open and unattended.
6. Complete Form D for high theft items such as iPads and laptops being loaned to students and staff. Keep for your records.

#### **Security: Securing assets which are portable high theft items**

1. Securely lock all doors, safes, storage areas and cabinets.
2. Store all keys to locks, doors, safes and cabinets in a safe and secure place.
3. Assure that all doors are locked and safe from prohibited entry at the end of the work day.

Fiscal Officer Signature: \_\_\_\_\_

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

Property Control Manager Signature: \_\_\_\_\_

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