**LOSS OR THEFT OF EQUIPMENT**

|  |  |  |  |
| --- | --- | --- | --- |
| To: | Property Control Office: |  | |
| From: | Department Chair/Coordinator: |  | |
|  |  |  | |
| Thru: | Division Chairperson |  | |
|  | Director/Dean |  | |
|  | Associate Vice President: |  | |
|  | Vice President |  | |
|  | President |  | |
|  |  |  | |
|  |  |  | |
|  | A. Description of Equipment: |  | |
|  | B. Asset Number: |  | |
|  | C. Date equipment was reported missing: |  | |
|  | D. Last known location of equipment: |  | |
|  | E. Actions taken to locate the equipment: | | |
|  |  | | |
|  |  | | |
|  |  | | |
|  | F. Measures taken to prevent recurrence of missing equipment: | | |
|  |  | | |
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|  |  | | |
|  |  | | |
|  |  |  |  |
|  | Department Chair/Coordinator |  | Date |
|  | | | |
| The above report has been reviewed and it is recommended that the department chair/coordinator  to be relieved or  not to be relieved from financial responsibility for the loss of specified equipment. | | | |

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| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| Director/Dean |  | Date |  | Associate Vice President |  | Date |

Approve  Disapprove  Approve  Disapprove

Approve  Disapprove  Approve  Disapprove

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| Vice President |  | Date |  | President |  | Date |

CC. Director of Procurement and Equipment

Office of Public Safety and Security

Senior Vice President for Business and Finance