

**BILLINGS PUBLIC SCHOOLS  
PROPERTY DAMAGE OR LOSS REPORT**

**Facility Dept. W.O. # \_\_\_\_\_**

School \_\_\_\_\_ Phone # \_\_\_\_\_ Report Date \_\_\_\_\_

Report by \_\_\_\_\_ Time/Date of Damage/Loss \_\_\_\_\_

Type of Damage: Vandalism \_\_\_\_\_ Theft \_\_\_\_\_ Other \_\_\_\_\_

Description of Damage or Loss: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

Discovered By: \_\_\_\_\_ Date/Time \_\_\_\_\_

**PROPERTY STOLEN OR DAMAGED**

Quantity	Item Description	Brand	Model	Serial #	Value

<b>Vendor Quotes</b>	<b>Facilities Labor</b>	<b>\$</b>
	<b>Travel</b>	<b>\$</b>
	<b>Materials</b>	<b>\$</b>
	<b>Misc. Expense</b>	<b>\$</b>
	<b>TOTAL COST:</b>	<b>\$</b>

Police Report # \_\_\_\_\_ Dated \_\_\_\_\_

Possible Suspects: \_\_\_\_\_

Administrator/Contact Person's Signature \_\_\_\_\_

SEND ORIGINAL TO FACILITIES SERVICES