

## RANKIN COUNTY SCHOOL DISTRICT LOST OR STOLEN PROPERTY AFFIDAVIT

School / Department	t:				
Address					
Address					
Location of Property:			Date:		
Description	Inventory Number	Police / Sheriff Report Number	Date Purchase	ed Cost or Value	
Detailed explanation of loss: (in case of theft, robbery or mysterious disappearance, show the name of the local law enforcement office notified and the date the loss was discovered. If such loss was not reported to a local law enforcement office at the time of the discovery, give a complete explanation of such failure.) Attach copies of police reports, if applicable.					
We hereby state	under oath that the ab	ove facts are true an	d correct to the b	est of our knowledge.	
Principal / Director:			Date:		
Employee Responsible for Property:			Date:		
THIS DATE PERSONALLY APPEARED BEFORE ME, the undersigned authority, in and for County, in the state of Mississippi, the above named individuals, who, being first duly sworn, state on their oaths that the above facts are true and correct to the best of their knowledge.					
GIVEN UNDER MY H	AND AND OFFICIAL S	EAL, this the	_day of	, 20	
			NOTARY PUBLIC		
This document has been reviewed and approved by				DENT	
UPDATED 12/1/2016   FORM FA-2a	1				