

K-12 Schools with users of device that are minors MUST have the affidavit signed by Parent, Guardian or IT Administrator or Staff After verification of the Loss.

Please complete the affidavit and submit when filing your claim Online.

		("Affiant"), am a resident of (address)		
	, County of		, State of	
age or older and competent to give to therwise stated, and that the follow	the following decl	aration based on m		
Circle One: Phone /Tablet/ Laptop/	Óther (Circle One: Lost / S	itolen	
Date of Loss: Time of	f Loss:	Authorized Us	ser Name:	
tem Owner Name:	I	Location/Address o	of Loss:	
o approval of claim):			ay request in certain cases prior	
	ounty			
The police report was filed in city/c		state of	Officer	
o approval of claim):		state of	Officer	
The police report was filed in city/containe:	Officer Phone	state of	Officer	
The police report was filed in city/coname:	Officer Phone	state of # e & Phone #	Officer Officer Driver's License/ID Number (We may request a copy)	

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