

Keenan

PROPERTY CLAIM FORM

DISTRICT

Name: _____

Address: _____

Date of Loss: _____

CONTACT

Name: _____

Title: _____

Phone: _____

a.m.

Time: _____ p.m.

LOSS LOCATION

Site Name: _____

Address: _____

Site Contact: _____

Phone: _____

Type of Loss: Fire Theft Lightning Hail Water Wind

Other (Explain) _____

Description of Loss & Damage: _____

In the event of theft or vandalism, please provide the following:

Police or Fire Dept. to which reported _____

Report # _____.

Suspect(s) apprehended by police? Yes No

Neighborhood area canvassed for witnesses/suspects? Yes No

We Tip Posters used to locate/identify suspects? Yes No

Completed by: _____ Date: _____

Liberty Union High School District

DESCRIPTON OF LOSS & DAMAGE

Give a detailed description of the incident, followed by a list of stolen/damaged property (indicate if any articles are NOT district property) and estimated value of each item and include photos of damage or how vandals gained access to property: