THE SCHOOL DISTRICT OF OSCEOLA COUNTY, FLORIDA
NOTIFICATION OF STOLEN PROPERTY

Facility Name**:** _____ Facility Number**:** _____

Police Incident Report #:_____ Date Stolen: _____

The Facility **must** obtain a complete copy of the original Police Report and send to the Property Records Department with the attached form. The Police Report must list the item(s) stolen, serial number(s) and complete description.

Property Record Number	Serial number	Description	Value

If stolen item(s) have been recorded on the borrower responsibility form and have been found to include negligence, provide a copy of the borrower form, the amount collected $_____ and the receipt number _____.

_____ _____ _____
Administrator signature Print name Date

_____ _____ _____ _____
Inventory clerk Date Executive Director of Contract Services Date

_____ _____ _____ _____
Director of Finance Date Property Records Technician Date

Original: Property Records Technician
Copy: Facility

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An Equal Opportunity Agency