



PROPERTY LOSS REPORT

Date _____

Employee's Name _____

Department _____ Campus Phone No. _____

Department Location _____

Supervisor's Name _____ Campus Phone No. _____

Location of Loss _____

Police or Fire Dept. Loss Reported to _____

Detailed Description of Loss of Damage (including date and time of incident,
specific items damaged or lost, and identification of any witnesses)

**Please forward to:
Office of Risk Management
Massie Hall B51**