



Killeen Independent School District Burglary –Vandalism-Loss Report

Date of Loss: _____ Police Case#: _____ Police Officer's Name: _____

Campus/Organization: _____

Type Report (Check one): Burglary Vandalism Loss Damaged

1. Date/time of discovery & to whom reported: _____

2. Items lost/damaged:

Item Description	Model #	Serial #	KISD#	Asset Value (From Property Mgmt Records)	(√) Missing/Damaged		Replacement Desired	
							Yes (√)	No

3. Brief description of loss/damage (include time/day/by whom missing items were last observed):

4. Report submitted by: _____ Date: _____ Phone: _____

5. Name/signature of Principal/Director: _____

Administrative Use Only

Risk Management Services: Date received: _____ Copy sent to Professional Standards: _____

_____ Maintenance Services: Labor & cost to repair/reoccupy: _____

_____ Technology Services: Labor & cost to repair: _____

_____ Property Management Services: KISD Property Yes No Inventory Adjusted? Yes No

Date repairs/replacements initiated: _____ Other Costs: _____

_____ Budget /Finance: Charge to Account: # _____

_____ Purchasing & Warehousing Services:

DATE: _____ PO or Requisition # _____ COST: _____

Risk Management Services:

Date claim submitted to Insurance: _____ Insurance Claim Number: _____