



HABERSHAM COUNTY SCHOOL DISTRICT

Technology Equipment Loss/Damage/Theft

School: _____ Date of Incident: _____

Room Number of Incident or Last Known Location of Item: _____

Principal: _____ Bookkeeper: _____

Employee: _____ Position: _____

Please circle one of the following: Loss of Property Damage to Property Theft of Property

Description of Property Lost, Damaged or Stolen:

Equipment Type (ex. Laptop): _____ Serial #: _____

Manufacturer (ex. Dell): _____

Model or Other Information (ex. E6400): _____

Description of Incident: _____

Attach additional write up if necessary.

Instructions: Attach/include any or all documents you believe will help in the investigation of this claim, including police reports, witness statements, video surveillance footage, etc. Send one copy of completed report packet to Mr. Dennis Unbehant, Technology Director AND one to the Financial Services Office.

Employee: _____ Date _____

Bookkeeper: _____ Date _____

Principal: _____ Date _____

Instructions: School Bookkeeper keep a copy of this form with annual Property Inventory Report.

Revised: 7/1/17