

THE CITY OF CHULA VISTA

DATE:

TO:

FROM: Finance Department

SUBJECT: MISSING CITY PROPERTY

Additional information is required before action can be taken on your request to remove the equipment listed below from the inventory record of fixed assets assigned to your department:

<u>Property Tag Number</u>	<u>Description</u>	<u>Inventory Value</u>
--------------------------------	--------------------	----------------------------

PLEASE COMPLETE THE FOLLOWING AND RETURN TO THIS OFFICE:

1. Last known date equipment was in department: _____

2. Last known location where equipment was used (building, room, area, etc.):

3. Approximate date of last usage: _____

4. Name of employee to whom equipment was assigned: _____

5. Is this employee still in the department? Yes _____ No _____

6. Did employee report loss? _____ If yes, on what approximate date? _____

7. Give a brief explanation as to possible reason why equipment is missing: _____

8. If the equipment was stolen, were the Police notified? Yes _____ No _____

Date _____

9. Person furnishing information: _____

Signature

Department Head Signature

Date

10. Administrative Action: Removal Approved _____

Further Investigation Needed _____

Date _____

Any questions pertaining to the preparation of this report should be referred to the Fixed Assets Accountant in the Finance Department at (619) 691-5051.