





SUPPLY MANAGEMENT SERVICES

REPORT OF LOST, STOLEN, DAMAGED OR DESTROYED PROPERTY

Entity Name :			Fund Cluster:	
Department/Office :			RLSDDP No.:	
			RLSDDP Date :	
Designation :			PAR No. :	
Police Notified:	Yes Police Station :		PAR Date :	
	Date :			
I	No			
Status of Property: (che	ck applicable box)			
status of Froperty . (enc		¬ ъ		
	Lost	Damaged		
_	Stolen	Destroyed		
Property No.	Description		Acquisition Cost	
Circumstances:				
				
I hereby certify that the	e item/s and circumstances stated above are tr	rue		
and correct. Noted by:				
			ver Printed Name of the Immediate	
			Supervisor	
	Date		Date	
Government Issued ID:				
ID No. :				
Date Issued :				
Date Issued .				
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government issued ident	WORN to before me thisday of	, aliia	nt exhibiting the above	
government issued ident	meation card.			
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Series of				