

<b>MIDDLE GEORGIA FACILITY SYSTEM</b> <b>LOST, DAMAGED, DESTROYED OR STOLEN PROPERTY</b>
<b>(Includes all property in Property System regardless of cost)</b>
1. NAME OF ITEM:
2. DECAL NUMBER:
3. LOCATION:
4. ORGANIZATION:
5. FUND SOURCE:
6. PROJECT:
7. SERIAL NUMBER:
8. DESCRIPTION OF EQUIPMENT:
9. ACQUISITION COST AND DATE:
10. OTHER:
<b>INCIDENT INFORMATION</b>
LOCATION OF INCIDENT:
DATE OF INCIDENT:
CIRCUMSTANCES OF INCIDENT:
<b>IF THEFT/FIRE, ATTACH THE POLICE/FIRE REPORT.</b>
LAW ENFORCEMENT OFFICIAL CONTACTED:
ADDRESS
PHONE NUMBER:
<b>AFFIDAVIT</b> <b>I DO SOLEMNLY SWEAR (OR AFFIRM) THAT, TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE ITEM(S) OF STATE PROPERTY SHOWN ABOVE WAS (WERE) LOST, MISSING, DAMAGED, DESTROYED, OR STOLEN IN THE MANNER STATED WHILE IN THE STATE SERVICE.</b>
Signature of person responsible for the property, title, and date
Property Coordinator and date
Agency Official and date
MGFS FORM 7.03B (1998)