

LOUISVILLE MUNICIPAL SCHOOL DISTRICT
FIXED ASSET SOURCE DOCUMENT
LOST OR STOLEN PROPERTY AFFIDAVIT FORM

FA4
Revised 8/3/98

Prepared Date _____ By _____ School _____

PLEASE REFER TO YOUR FIXED ASSET INVENTORY LISTS TO COMPLETE THE FOLLOWING INFORMATION

(1) Identifying Control Number _____ *(2) Type _____ (3) Item No. _____

(4) Description of Item _____

(5) Serial No. _____ (6) Location _____ Room _____

(7) Date Purchased _____ (8) Value on Books _____

Detailed Explanation of Loss: (In case of theft, robbery or mysterious disappearance, show the name of the Sheriff's Office or Police Office notified and the date the loss was discovered. Attach copy of report if one was filed. If such loss was not reported to a Sheriff's Office or Police Office at the time of discovery, give a complete explanation of such failure.)

WE HEREBY STATE UNDER OATH THAT THE ABOVE FACTS ARE TRUE AND CORRECT TO THE BEST OF OUR KNOWLEDGE.

Board President _____ Date _____

Property Manager _____ Date _____

Principal/Department Head Responsible for Property _____ Date _____

Employee Responsible for Property _____ Date _____

THIS DATE PERSONALLY APPEARED BEFORE ME, the undersigned authority, in and for WINSTON County, in the State of Mississippi, the above named individuals, who, being first duly sworn, state on their oaths that the above facts are true and correct to the best of their knowledge.

GIVEN UNDER MY HAND AND OFFICIAL SEAL, this the _____ day of _____, 19 _____

Notary Public

Date entered into computer _____

Entered by _____

General Journal No. _____