

Vandalism, Theft, Malicious Damage, Breaking & Entering Report Form



Completed form and all copies to be submitted to the office of the Secretary-Treasurer.

School: _____ Location of Incident: _____

Description of Incident: _____

How did the Incident Occur: _____

Name of Property Owner: _____

Name of Person Discovering the Incident: _____

Date and Time of Discovery: _____

RCMP contacted: YES NO Police File #: _____

The following items were damaged or stolen:

Item	Damaged	Stolen	Value	Serial/Model No.

Additional information: _____

** Please attach any documentation relevant to this claim.*

Principals'/Manager's Signature

.....
FOR DISTRICT OFFICE USE ONLY
.....

Remarks: _____

Costs:

Item #	Labour	Material	Total

Administrative Process: Please initial and date when your section is complete, and circulate to the next department.

OFFICE	INITIALS	DATE
Secretary Treasurer		
Maintenance		
Purchasing		
SPP Claim No.:		