



TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER EL PASO

Missing, Lost, or Stolen Property Report

Department

ORGN Code

Please check the appropriate occurrence.

Is the asset?
Missing
Lost
Stolen

What date did you become aware of the occurrence?

Table with 6 columns: Asset Tag #, Description, Purchase Date, Purchased Amount, Serial Number, Location

Person(s) responsible for asset(s), Property Custodian, Phone

Report in detail the circumstances regarding this report.

Negligence Statement:

REQUIRED: Please check the appropriate box

Our investigation of the circumstances surrounding the property listed above indicates reasonable cause to believe that the missing property was through the negligence of the person(s) charged with the care and custody of this property.

Our investigation of the circumstances surrounding the property listed above indicates reasonable cause to believe that the missing property was not through the negligence of the person(s) charged with the care and custody of this property.

Property Custodian Signature:

sign here, Date, Printed Name and Title

My signature indicates that I have reviewed the circumstances surrounding the missing property and have made a determination regarding negligence based on those circumstances.

Please click the Submit button to email the completed form to:
TO: baelp-asset.accounting@ttuhsc.edu (Property Management)
CC: elpasoitsecurity@ttuhsc.edu (Information Security)
CC: elpasocomplianceoffice@ttuhsc.edu (Institutional Compliance)
CC: ttpelpaso@ttuhsc.edu (Police Department)

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Instructions for Completing the

MISSING, DAMAGED, LOST, OR STOLEN PROPERTY REPORT

1. **DEPARTMENT** - Enter the name of your department.
2. **ORG** - Enter the organization code for your department (not the paid account).
3. **DATE** - Enter the current date.
4. **INVENTORY #** - Enter the inventory tag number. This is the number on the inventory tag which was assigned to the property by Property Management (not the serial number).
5. **DESCRIPTION** - Enter a brief, but accurate, description of the property.
6. **INVENTORY CARRYING VALUE** - Enter the inventory carrying value.
7. **DATE ACQUIRED** - Enter the date that the property was purchased.
8. **DOCUMENT ID#** - Enter the voucher number. This is the transaction that recorded the acquisition of the property.
9. **ESTIMATED VALUE AT TIME OF LOSS** - Enter an amount which estimates the fair market value of the property at the time of loss.
10. **THE CIRCUMSTANCES RESULTING IN THIS REQUEST ARE** - Explain why this property cannot be located and what efforts have been taken to locate the property. Provide as much information as possible.
11. **IT IS MY OPINION THAT THIS PROPERTY SHOULD (SHOULD NOT) BE PAID FOR BY THE PERSON IN WHOSE CARE THE ITEM WAS ENTRUSTED AT THE TIME OF LOSS FOR THE FOLLOWING REASONS** - Explain why the person who was responsible for this property should or should not be required to reimburse the State of Texas for the loss sustained. If you state that the person responsible for this property should not be required to reimburse the State of Texas for the loss, explain what precautions were taken by your department to provide for the safekeeping of property. Note, property lost or stolen through the negligence of the responsible party, must be reported to the Attorney General within 72 hours of the occurrence.
12. **WITNESS** - This should be the signature of someone other than the Property Custodian such as the department Secretary or Administrative Assistant. This signature is required.
13. **PROPERTY CUSTODIAN** - This is usually the head of the department unless the responsibility has been officially delegated to someone else in writing by the head of the department.