

Vehicle -Theft/Vandalism Report

CONFIDENTIAL DOCUMENT For use by School District and CRMA only.

School District Burrel Union Elementary			School Site – Name and Address						
Time & Place	Date & Time of Loss:		Location of Accident:						
	Year	Make	Model	Vehicle No.	Vehicle ID N	Vehicle ID No.			
	Name of District Drive		jer:				Telephone:		
	Position:		Dept:						
District Vehicle			I						
	Police No	otified?							
	Estimated cost of repair:		Description of damages:						
Items Stolen									
Prepared by:			Date & Time:		Signature:	Signature:			