

Vehicle -Theft/Vandalism Report

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CONFIDENTIAL DOCUMENT For use by School District and CRMA only.

School District Coalinga-Huron USD			School Site – Name and Address						
Time & Place	Date & Time of Loss:		Location of Accident:						
	Year	Make	Model	Vehicle No.	Vehicle ID N	lo.			
	Name of District Driv			er:		Telephone:			
	Position:		Dept:						
District Vehicle	ehicle								
	Police Not	Police Notified? Describe how theft/vandalism occurred:							
	Estimated cost of repair:		Description of damages:						
Items Stolen									
						· ·			
							1		
Propored by:			Data & Time		Cignotiva				
Prepared by:			Date & Time:		Signature:				