

Vehicle -Theft/Vandalism Report

CONFIDENTIAL DOCUMENT For use by School District and CRMA only.

School District			School Site – Name and Address					
Mariposa C	ounty U	Jnified						
Time & Place	Date & Time of Loss:		Location of Accident:					
	Year Make		Model	Model Vehicle No. Vehicle ID No.				
Name of District Drive								
	Name of I	District Drive	er:				Telephone	:
	Position:		Dept:		_			
District Vehicle								
	Police Notified? Describe how theft/vandalism occurred:							
			1					
	Estimateo repair:	d cost of	Description of d					
Items Stolen								
							I	
Prepared by:			Date & Time:		Signature:			