
Name of Institution

P.O. Box 6177
Address

MS State, MS 39762
Address

LOST, STOLEN OR MYSTERIOUS DISAPPEARANCE PROPERTY AFFIDAVIT

Department: _____

Date: _____

Description	Model	Serial Number	Mfg	Purchase Date	Inventory Number	Current Cost
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Detailed Explanation of Loss: (in the case of theft, robbery or mysterious disappearance, show the name of the law enforcement agency notified and the date the loss was discovered. If such loss was not reported to a law enforcement agency at the time of the discovery, give a complete explanation of such failure.)

Investigating Police Department: _____

Case Number: _____

WE HEREBY STATE UNDER OATH THAT THE ABOVE FACTS ARE TRUE AND CORRECT TO THE BEST OF OUR KNOWLEDGE.

Date

Employee Responsible for Property

THIS DATE PERSONALLY APPEARED BEFORE ME, the undersigned authority, in and for _____
County, in the State of Mississippi, the above named individuals, who, being first duly sworn on their oaths that the above facts
are true and correct to the best of their knowledge.

GIVEN UNDER MY HAND AND OFFICIAL SEAL, this the _____ day of _____ 20____

Notary Public