

**PROPERTY LOSS FORM**  
 DEPARTMENT OF POLICE SERVICES – SHELTON

**TYPE OF ITEM      BRAND NAME      MODEL #      SERIAL #      IDENTIFYING MARKS ETC...      COLOR      VALUE**

<b>TOTAL</b>						<b>\$</b>

ATTEST THAT THE ABOVE INFORMATION IS ACCURATE AND TRUE TO THE BEST OF MY KNOWLEDGE.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

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