

PROPERTY AND CASUALTY CLAIMS FORM

Please circle one of the following: Damage to Property/Theft of Property/Personal Injury

Date of Incident: _____ Name of School: _____

Room #: _____ Teacher Name: _____

Description of Property Damaged or Stolen

Service Tag/Serial #: _____

Manufacturer (ex. Dell): _____

Model (ex. E6400 Laptop): _____

Description of Incident

Attach additional write up if necessary.

Submit any or all of the following documents: Police Report, Witness Statements, Medical Bills, Letter from Claimants, and any documentation you feel will help in the investigation of the claim.

Submit this information to the Office of Administrative Services, 711 Green Street, Gainesville, GA.

Please fax a copy of this form to Mallory Garrett at the Tech Center (770-533-4017) AND Julie Preston at the Central Office (770-535-7404).