### **Goods Lost Incident Report**

**Date of Report:** [Insert Date]  
**Time of Report:** [Insert Time]

#### **Reporter Details**

* **Name:** [Full Name of the Reporter]
* **Contact Information:** [Phone Number, Email Address]
* **Address:** [Full Address

#### **Details of Lost Goods**

* **Item Description:** [Provide a detailed description of the lost goods, including type, quantity, brand, and unique identifying features.]
* **Estimated Value:** [Approximate monetary value of the goods.]
* **Date and Time Lost:** [Provide the date and time when the goods were last seen or used.]
* **Location Lost:** [Specify where the goods were last seen or believed to have been lost.]

#### **Circumstances Leading to Loss**

[Provide a detailed explanation of the events leading to the loss of the goods, including any suspicious activity observed.]

#### **Actions Taken**

* **Search Conducted:** [Yes/No]
  + **Details:** [Specify the areas and methods searched.]
* **Reported to Authorities:** [Yes/No]
  + **Agency Name:** [Name of the agency (if applicable)]
  + **Report Number:** [Reference number, if available]

#### **Declaration**

I hereby declare that the information provided above is true and accurate to the best of my knowledge.

**Signature:** [Your Signature]  
**Date:** [Insert Date]