

**EQUIPMENT REPORT FORM**

**Note: If equipment has been stolen, lost, destroyed, or damaged, the Equipment Report form must be completed and sent in pdf format to [saaboforms@jjay.cuny.edu](mailto:saaboforms@jjay.cuny.edu) within 48 hours. If equipment has been stolen, the Department of Public Safety and Student Activities Association Business Office should be notified immediately. The CSIL coordinator or department designee must provide the Student Activities Association, Inc. Business Office with a completed Equipment Report form along with a copy of the incident report from Public Safety.**

**Organization/Department** \_\_\_\_\_ **Fiscal Year** \_\_\_\_\_

**Contact Person Email** \_\_\_\_\_ **Contact Person Phone #** \_\_\_\_\_

<b>Check One:</b> ___ Damaged ___ Stolen ___ Lost ___ Destroyed		<b>Storage Location</b> _____
<b>ITEM DESCRIPTION</b> (Model Name, Number, etc.)	<b>ITEM CONDITION</b> Describe any damages to equipment (ex. Cabinet wheel is broken) OR if item was lost/stolen.	

I hereby affirm that I acknowledge and understand everything written above.

\_\_\_\_\_  
 Print Name  
 Student Organization Executive

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Print Name  
 CSIL/Department Designee

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

<b>Official Use</b>	
<b>Report Status:</b>	<b>Person Responsible for Equipment</b>
<b>Notes:</b>	<b>Name:</b> _____
	<b>Department:</b> _____
	<b>Release Date:</b> _____