

**CERTIFICATE OF MISSING/LOST, STOLEN, CANNIBALIZED/DISCARDED, OR DESTROYED PROPERTY**

**(\*\*ALL SIGNATURES LISTED BELOW ARE REQUIRED FOR PROCESSING)**

County/Department	County/Dept. Manager Signature	Dept. or Unit Head/Associate Director/Dist. Director Signature
Org #		Date Submitted

In accordance with the provision of the University of Arkansas – I am requesting removal of the following listed property items from the records of this county/department. The items are (check below):

1.  Missing/Lost (Explain in the Remarks section)
2.  Cannibalized/Discarded (Explain in the Remarks section)
3.  Stolen (Attach copy of the Official Police Report)
4.  Destroyed (Explain in the Remarks section)

Tag #:	Description:	Located:	Equipment Assigned to:

**REMARKS: (Required for Missing/Lost & Cannibalized/Discarded)**

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**Any lost/stolen computer must be reported to IT immediately. Send a copy of this form to IT.  
 Please forward original to [property@uada.edu](mailto:property@uada.edu) and retain a copy for your records.**

<p>FOR FINANCIAL SERVICES USE ONLY:</p> <p>.....</p> <p>PROPERTY ACCOUNTANT SIGNATURE        (UPON REMOVAL FROM INVENTAORY</p> <p>.....</p> <p>Date</p>	<p>REQUESTED PERMISSION TO DELETE:</p> <p>.....</p> <p>AVP Ext. Date                      DfNa Date</p> <p>RECEIVED PERMISSION TO DELETE</p> <p>.....</p> <p>AVP Ext. Date                      DfNa Date</p>
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