





RANCHO SANTIAGO COMMUNITY COLLEGE DISTRICT TEST PILOT: LOST, STOLEN, OR UNRETURNED ACCESS CREDENTIAL REPORT FORM

SECTION A							
SITE:				annunun		TODAY'S DATE:	
NAME:		_				DATE OF LOSS:	
	me, First Name, M.I	_		_			
TITLE:							
DEPT:		—	= :3==:0T	- · - D	- >= "	•	
EMPLOYEE ID: DISTRICT EMPLOYEE ID BADGE #: CREDENTIAL WAS: □ LOST □ STOLEN □ UNRETURNED (skip Section B)							
SECTION B - DESCRIP			MINKELOUIAED (SVIP	Section	in R)		
Where were the keys	s at the time of loss? circumstances in whic	ch f	the keys were lost o	or sto	lan?		
Please describe the c	Il Cumstances in wind	J1 c	.ne keys were lost o	1 Stur	enr		
						afaty2 □ VFS □ N	
	ed to any authorities	- 10				Safety? □ YES □ N	10
Police/Sheriff F	· — —	_	Campus Safety Inc	ideni	No.:		
	_						
Please complete the	chart below and list t	the	key name or numb			ted lost or stolen:	
	Master Key?	ĺ			Master Key?		Master Key?
Key Name/No.	If so, indicate type (AL-2, AL-3, or AL-4)	ı	Key Name/No.		o, indicate type 2, AL-3, or AL-4)	Key Name/No.	If so, indicate type (AL-2, AL-3, or AL-4)
Rey Name, No.	(AL-2, AL-3, OI AL -1)	\vdash	Rey Ivallie, Ivo.	(//	., AL-3, UI AL -1	Rey Name, No.	(AL-2, AL-3, OI AL 3,
		\vdash		 			
		\vdash		 			
SECTION D - REPLACE	EMENT FEE FOR LOST	Γ, S	TOLEN, OR UNRETU	JRNEI	D MECHANICAI	_ KEY	
Key Type	Cost Per Key		# of Keys Replaced	1	Subtotal		
AL-2	\$ 150.00	х		=		\neg	
AL-3	\$ 100.00	х		=			
AL-4	\$ 50.00	х		=			
AL-5	\$ 25.00	х		=			
Cabinet Master	\$ 10.00	х		=			
Cabinet File/Desk	\$ 3.00	х		=			
		_	Total Fe	ee:		<u> </u>	
SECTION E - SUBMIT	TER'S SIGNATURE (No	ot r	required to be subm	itted	by the employe	ee indicated in SECTIO	N A above)
I certify the above is	true and correct						
NAME:							
	me, First Name, M.I						I
SIGNATURE: DATE:							
SECTION F - SAFETY (OFFICE USE ONLY						
RECEIVED BY:							
Name		_					
SIGNATURE:						DATE:	