FINANCIAL LIABILITY INVESTIGATION OF PROPERTY LOSS REGISTER

For use of this form, see AR 735-5; the proponent agency is DCS, G-4

NAME OF ACTIVITY	LOCATION	PAGE NO.

INQUIRY/ INVESTIGATION NUMBER	DOCUMENT NUMBER	ORIGINATOR *(Accountable officer, or primary hand receipt holder)*	DATE LOSS DISCOVERED	DATE PREPARED	DATE APPROVED	NO. OF DAYS PROCESSING TIME	FINANCIAL LIABILITY CHARGES			COLLECTION OR APPEAL STATUS
							ACTUAL LOSS	AMOUNT	LOSS TO	

SERIAL NO.										PAGE NO.