Insurance Fund Claim Worksheet

Replacement of CCSD Supplies and Inventoried Equipment

Location:	Location #:						
Loss Date:	Police Report #:						
Type of Loss:		Claim #:					
Item Lost/Damaged - Describe (Include Make/Model/Serial #, suggested vendor, etc.)	Quantity Lost	V Cost Per Item		Approved? (Completed by RM)			
			□Yes □No	Yes	No		
			□Yes □No	Yes	No		
			□Yes □No	Yes	No		
			□Yes □No	Yes	No		
			□Yes □No	Yes	No		
			□ Yes □ No	Yes	No		
			□Yes □No	Yes	No		
			□Yes □No	Yes	No		
			□ Yes □ No	Yes	No		
 Make sure you attach a copy of 	f the site inver	ntory list show	wing the lost or dar	naged ite	ms.		
Total Replacement: Cost: \$		Deducta	Yes	No			
Contact Person:		Contact's Phone #:					
Administrator's Name:		Date Submitted:					
Risk Management Examiner		Signature	Date of Approval				
PLEASE PROVIDE BUDGET	CODING BEL	. OW: (For C	laim Deductable)				
Location Cost Center:	-ocation Cost Center:			Name of Approver:			
Approval Date:		Signature:					
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Continuation Sheet Insurance Fund Claim Worksheet

Claim #:

Item Lost/Damaged - Describe (Include Make/Model/Serial #, suggested vendor, etc.)	Quantity Lost	Estimated Cost Per Item	Replacement Requested?	Approved? (Completed by RM)	
			□Yes □No	Yes No	
			□Yes □No	Yes No	
			□Yes □No	Yes No	
			□Yes □No	Yes No	
			□Yes □No	Yes No	
			□Yes □No	Yes No	
			□Yes □No	Yes No	
			□Yes □No	Yes No	
			□Yes □No	Yes No	
			□Yes □No	Yes No	
			□ Yes □ No	Yes No	
			□ Yes □ No	Yes No	
			□Yes □No	Yes No	
			□Yes □No	Yes No	
			□ Yes □ No	Yes No	
			🗆 Yes 📄 No	Yes No	
			□Yes □No	Yes No	
			□Yes □No	Yes No	
			□Yes □No	Yes No	
			□Yes □No	Yes No	

Insurance Fund Claim Worksheet Completion Instructions

Please make sure that all of the information is complete before sending form to Risk Management.

- 1. All items claimed will be tracked by location and claim number. Make sure you include this information on each worksheet.
- 2. List each item that was lost or damaged individually unless the item is generic in nature and can be ordered in large quantities. (i.e. text books, posters, manuals, etc.) Always list electronics and technology equipment individually because of serial numbers.
- 3. The estimated cost to replace the item can be found by searching the purchasing catalogs which are available on the CCSD website under the Purchasing Department.
- 4. Make sure you indicate if you would like the item replaced as part of the loss. In some instances you may choose not to replace the item due to a change in curriculum or due to budget constraints. Remember if the loss is a burglary or vandalism the \$500 deductible for the location would apply to the total loss amount. Therefore, if the location does not have the funding to pay the \$500 deductible they could choose to not replace certain items lost which would equate to the deductible.
- 5. The funds used to replace all of the items, except for the deductible, will be from Risk Management. Therefore, Risk Management must sign off on each item listed before Purchasing can process for replacement. Risk Management will review the loss and determine which items are covered. The location and Purchasing will receive a copy of the worksheet with Risk Management's replacement authority once completed.
- 6. If you are replacing all of the items lost and the deductible applies, you will need to supply the appropriate coding for the \$500, unless you choose to pay for the deductible by not replacing items. The coding would be the same as if you were to order the supplies for the first time from your budget.
- 7. The continuation page can be used as many times as necessary to include all items lost or damaged.