EXHIBIT C

UNIVERSITY OF CALIFORNIA
PERSONAL PROPERTY
LOSS/DAMAGE REPORT

1. Campus Dept.: __________________________ Reimburse: 6- ________________
2. Type of Loss: Theft_____ Fire_____ Transit_____ Other_____
3. Date of Loss: ____________ Time: ______________ Location: ________________
4. Describe Loss: __________________________________________________________
   _______________________________________________________________________
   _______________________________________________________________________
5. Identification of Property: _______________________________________________________________________________________
6. Value: $_________________ Total Value of Claim (including freight): $______________
7. Name of Transit Carrier (when applicable): ________________________________
8. Date of "Notice of Claim"Letter to Transit Carrier (when applicable): ______________
9. a. Amount Paid by Transit Carrier: $_________________
   b. Reimbursable Amount under Self-Insurance: $_________________
   c. Reimbursable Amount under Excess: $_________________
   d. Total: $_________________
10. Police Reports Available: Yes __ No ___ Other __________
    Reports Available: Yes __ No ___
    Attached: Yes __ No __ Attached: Yes
11. Remarks or Special Information: ________

______________________________________________________________________________

Submitted by____________________________             Date:_____________________________