

SOUTH CAROLINA DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

MISSING PROPERTY REPORT

**Immediately notify DDSN's IT Helpdesk (803-898-9767),
if the missing property is a device used to access DDSN data or the DDSN Network**

Section I:

Type of Property: DDSN Property Employee's Personal Property

Name of Employee Reporting the Loss or Property Owner (if personal property): _____

Description of the Missing Property (Provide as much information as possible. Include DDSN Decal number, if applicable):

Date property was last seen, where it was seen, and by whom: _____

Date property was first discovered missing: _____

Circumstances leading to the discovery of the missing property: _____

Actions taken to attempt to recover the missing property: _____

Section II:

Name and Title of the Person to whom the loss is being reported: _____

Actions taken in response to report (check if action taken and provide the additional information requested):

DDSN IT Notification:

Name of person who called the Helpdesk: _____

Date and time of call to Helpdesk: _____

Internal Investigation:

Date investigation opened and Name of Investigator: _____

Report made to local law enforcement entity:

Name of entity: _____

Person making report: _____

Date of reporting: _____

Section III:

Follow-up actions taken (check if action taken and provide the additional information requested):

Internal Investigation completed. Attach report of the findings of the investigation.

Report made to local law enforcement entity. Attach report.

Incident reported as Adverse Operational Event as required by DDSN Directive 100-21-DD.

Actions taken to prevent other occurrences. List actions: _____

Signature/title of person completing this form Date: _____

DISTRIBUTION (Indicate to whom copies of this completed form has been sent)

Chief Information Security and Privacy Officer Director-Internal Audit Division Director-Finance Division