

EXHIBIT 1

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA
CERTIFICATE OF LOSS

SCHOOL: _____ **DATE:** _____

ACTIVITY: _____

Items Issued To: _____ Student ☐
Teacher ☐

(Teacher/Student Name)

Part 1 - Merchandise Loss

Dates of Issue	Description	Number Issued
_____	_____	_____
_____	_____	_____
_____	_____	_____

Number Reported Sold Or Used:	_____	TOTAL ISSUED	_____
Number Of Items Returned:	_____		
Total Accounted For:	_____		

BALANCE UNACCOUNTED FOR _____

(Complete Part 3 Below)

Part 2 - Receipt Or Cash Loss

Initial Receipt Number(s) Missing: _____

Cash Amount Unaccounted For (If Applicable): _____

(Complete Part 3 Below)

Part 3 - Statement

I acknowledge the above as an accurate record of the said items issued into my custody, and the following is my best explanation of this discrepancy:

Reviewed By: _____

Signature: _____

Signature Of Employee In Charge Of Distribution

Signature Of Principal

____ SCHOOL

OBLIGATION CARD

		Installment #	Date Pd.	Amt.	Receipt. #
Name: _____ (Print)	Date _____	1	/ /		_____
Student #: _____	Grade _____	2	/ /		_____
Amount: _____	Class/Club _____	3	/ /		_____
Reason for Obligation: _____		4	/ /		_____
TITLE: _____ S/A _____ Non S/A _____		5	/ /		_____
Book Year _____	Publisher _____	6	/ /		_____
NUMBER _____	CONDITION _____	7	/ /		_____
DATE ISSUED _____	DATE RETURNED _____	8	/ /		_____
COURSE _____		9	/ /		_____
Teacher: _____ (Print)		10	/ /		_____
Student Signature: _____					

____ SCHOOL

OBLIGATION CARD

		Installment #	Date Pd.	Amt.	Receipt. #
Name: _____ (Print)	Date _____	1	/ /		_____
Student #: _____	Grade _____	2	/ /		_____
Amount: _____	Class/Club _____	3	/ /		_____
Reason for Obligation: _____		4	/ /		_____
TITLE: _____ S/A _____ Non S/A _____		5	/ /		_____
Book Year _____	Publisher _____	6	/ /		_____
NUMBER _____	CONDITION _____	7	/ /		_____
DATE ISSUED _____	DATE RETURNED _____	8	/ /		_____
COURSE _____		9	/ /		_____
Teacher: _____ (Print)		10	/ /		_____
Student Signature: _____					

____ SCHOOL

OBLIGATION CARD

		Installment #	Date Pd.	Amt.	Receipt. #
Name: _____ (Print)	Date _____	1	/ /		_____
Student #: _____	Grade _____	2	/ /		_____
Amount: _____	Class/Club _____	3	/ /		_____
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____ SCHOOL

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COURSE _____		9	/ /		_____
Teacher: _____ (Print)		10	/ /		_____
Student Signature: _____					