

Employee Lost Article Declaration (Hotel)

Date:

Declaration No.:

Employee Name:

Employee ID:

Department:

Contact Number:

Date and Time of Loss:

Location of Loss:

Details of Lost Article(s):

Description of Incident (How the article was lost):

Steps Taken to Locate the Article:

Reporting Manager/Supervisor:

Remarks (if any):

Employee Signature

Manager/Supervisor Signature

Date: