



# TEXAS ASSOCIATION *of* COUNTIES RISK MANAGEMENT POOL

1-800-456-5974 / 512-478-8753 / 512-615-8942*fax*

## CRIME CLAIM LOSS REPORT

**Please indicate type of claim:**

**Incident Report Only**

**Making a Claim**

Entity No.:	Date of Incident:
<b>MEMBER:</b>	Date Reported:
Address:	Contact Name:
City/State/Zip:	Contact Phone NO.:
	E-MAIL:

<b>Incident Description:</b>

<b>Incident Discovered By Whom:</b>
<b>By What Means:</b>
<b>Approximate Duration of Incident:</b>

Suspect(s) and/or Actor(s) if known	Date(s) of Employment and/or Department

<b>Investigating Law Enforcement Agency and/or Jurisdiction</b>
<b>Charges Filed?</b>

<b>Other(s) Involved:</b>	<b>Additional Information:</b>