

INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS, LOCAL 731

**RENO FIREFIGHTERS ASSOCIATION
9590 S. MCCARRAN BLVD. RENO, NV 89523
Email to: executive.board@iaff731.org**

PERSONAL PROPERTY CLAIM

- | | |
|-----------------------------------|--------------------------------------|
| <input type="radio"/> Glasses | <input type="radio"/> Contact Lenses |
| <input type="radio"/> Watch | <input type="radio"/> Knife |
| <input type="radio"/> Stethoscope | <input type="radio"/> Phone |

NAME OF CLAIMANT: _____

DATE OF LOSS: _____ **COPY OF RECEIPT ATTACHED:** YES /NO

WITNESS (if any): _____

EXPLANATION: _____

AMOUNT OF REIMBURSEMENT REQUESTED: \$ _____

.....
FOR EXECUTIVE BOARD USE ONLY

Date Considered: _____ Disposition of Claim: _____

Authorized Signature: _____

.....
FOR CITY USE ONLY

AMOUNT PAID \$ _____ CHECK NUMBER: _____

AUTHORIZED SIGNATURE: _____