

Missing Goods Declaration Form

Date:

Declarant Details

Full Name

Enter your full name

Contact Number

Enter your phone number

Email Address

Enter your email

Address

Enter your address

Goods Information

Description of Goods

Describe the missing goods

Quantity

Estimated Value

Enter estimated value

Serial/Lot Number (if applicable)

Serial or Lot Number

Incident Details

Date of Incident

Location

Where did the incident occur?

Description of Circumstances

Describe how, when, and where the goods went missing

Declaration

I hereby declare that the information provided above is true and correct to the best of my knowledge.

Signature:

Date:

Important Notes

- This declaration must be completed accurately and truthfully by the reporting party.
- Supporting documents (invoices, receipts, or delivery notes) should be attached where applicable.
- False declarations may result in legal penalties.
- Submit the completed form to the relevant authority or company office as instructed.
- Retain a copy of this form for your records.