

APPENDIX H - PROPERTY & LIABILITY CLAIM FORM

Menifee Union School District

29775 Haun Road

Menifee, CA 92586

(951) 672-1851



PROPERTY & LIABILITY CLAIM FORM

To: riskmanagement@menifeeusd.org		Date Reported:	
Menifee Union School District - Risk Management			
1. Claims for death, injury to person, or to personal property must be filed not later than six (6) months after the occurrence (Gov. Code, Section 911.2). 2. Claims for damages to real property or breach of contract must be filed not later than one year after the occurrence (Gov. Code, Section 911.2).			
Name of Claimant:		Date of Birth:	
Address:	City:	Zip Code:	
When did the damage or injury occur?			
Where did the damage or injury occur?			
How and under what circumstances did the damage or injury occur?			
What particular action by the District or its employees caused the alleged damage or injury? (Include names of employees, if known.)			
What sum do you claim? Include the estimated amount of any prospective loss insofar as it may be known at the time of the presentation of this claim, together with the basis of computation of the amount claimed; attach estimates or invoices, if possible. (If amount claimed exceeds \$10,000, no dollar amount shall be stated.)			
			\$
			\$
			\$
Total Amount Claimed			\$
If total amount claimed exceeds \$10,000, is this a Limited Civil Case?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Names and addresses of witnesses, doctors, and hospitals:			
Date:	Signature of Claimant:		

NOTICE: Section 72 of the California Penal Code provides: "Every person who, with intent to defraud, presents for allowance or for payment to any School District, any false or fraudulent claim, is guilty of a felony punishable by fine and/or imprisonment."