

FORT LEAVENWORTH LOST/STOLEN INCIDENT REPORT FOR ID's/CAC's

PLEASE PRINT

1. ID/CAC's ARE THE PROPERTY OF THE UNITED STATES GOVERNMENT AND HOLDERS ARE REQUIRED TO SAFEGUARD THEM AT ALL TIMES. INDIVIDUALS WITH LOST OR STOLEN ID's/CAC's ARE REQUIRED TO PRESENT THIS DOCUMENTATION FROM THEIR SECURITY OFFICER OR SPONSOR CONFIRMING THE CARD HAS BEEN REPORTED LOST OR STOLEN. ALL REQUIRED SIGNATURES MUST BE ON THIS FORM BEFORE BEING PRESENTED FOR A REPLACEMENT CARD. THIS DOCUMENT MUST BE SCANNED INTO DEERS WHEN A REPLACEMENT CARD IS ISSUED. THE REPLACEMENT CARD WILL HAVE THE SAME EXPIRATION DATE AS THE LOST OR STOLEN ONE.

2. NAME OF INDIVIDUAL WITH LOST ID/CAC:

3. DATE OF BIRTH: mm/dd/year

4. SSN LAST FOUR:

5. SIGNATURE CONFIRMATION IS REQUIRED BY THE FOLLOWING FOR ALL LOST OR STOLEN ID/CAC's (CHECK THE APPROPRIATE BOX FOR THE LOST OR STOLEN ID/CAC) TWO VALID FORMS OF STATE OR FEDERAL ID REQUIRED FOR REPLACEMENT ID ISSUANCE. PRIMARY ID MUST BE A VALID PHOTO ID FOR ALL ADULTS 18 AND OVER.

- SERVICE MEMBER (SM)- SM, DUTY ORGANIZATION SECURITY OFFICER, ID CARD SITE SECURITY MANAGER
- CIVILIAN EMPLOYEE - CIVILIAN EMPLOYEE, DUTY ORGANIZATION SECURITY OFFICER, ID CARD SITE SECURITY MANAGER
- CONTRACTOR - CONTRACTOR, DUTY ORGANIZATION SECURITY OFFICER, ID CARD SITE SECURITY MANAGER
- RETIREE (MILITARY OR CIVILIAN) - RETIREE, ID CARD SITE SECURITY MANAGER
- FAMILY MEMBER - SPONSOR, FAMILY MEMBER, ID CARD SITE SECURITY MANAGER

6. DATE CARD WAS LOST:

7. PLACE CARD WAS LOST:

8. SPONSOR'S NAME:

9. BRANCH OF SERVICE/UNIT IF APPLICABLE:

10. BRIEFLY EXPLAIN HOW ID/CAC WAS LOST:

11a. SPONSOR SIGNATURE:

11b. DATE:

12a. FAMILY MEMBER SIGNATURE (IF APPLICABLE):

12b. DATE:

13a. UNIT/ORGANIZATION SECURITY OFFICER SIGNATURE:

13b. DATE:

14a. VERIFYING OFFICIAL SIGNATURE: (ID CARDS)

14b. DATE:

15a. SITE SECURITY MANAGER SIGNATURE: (ID CARDS)

15b. DATE:

16. ANY ADDITIONAL INFORMATION YOU WOULD LIKE TO ADD TO THIS STATEMENT: