

# St. John Police Department

8944 St. Charles Rock RD. St. John MO 63114  
314-427-8700 ext 5.

## Personal Property Inventory Form

Please complete this form and place in a safe spot of your residence. This form is for your records and can be used to help recover your property in case of theft, loss, or damage. The St. John Police Department will need the following information to complete their reports, if necessary. If you have any questions please call us at 314-427-8700 ext. 5.

Owner Name: \_\_\_\_\_ Item (tv,radio,jewelry etc): \_\_\_\_\_  
Brand Name: \_\_\_\_\_ Make: \_\_\_\_\_  
Model #: \_\_\_\_\_ Serial #: \_\_\_\_\_  
Value: \_\_\_\_\_ Date purchased: \_\_\_\_\_  
Where purchased: \_\_\_\_\_ Location (kitchen,bedroom,etc): \_\_\_\_\_  
Description: \_\_\_\_\_

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Owner Name: \_\_\_\_\_ Item (tv,radio,jewelry etc): \_\_\_\_\_  
Brand Name: \_\_\_\_\_ Make: \_\_\_\_\_  
Model #: \_\_\_\_\_ Serial #: \_\_\_\_\_  
Value: \_\_\_\_\_ Date purchased: \_\_\_\_\_  
Where purchased: \_\_\_\_\_ Location (kitchen,bedroom,etc): \_\_\_\_\_  
Description: \_\_\_\_\_

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Owner Name: \_\_\_\_\_ Item (tv,radio,jewelry etc): \_\_\_\_\_  
Brand Name: \_\_\_\_\_ Make: \_\_\_\_\_  
Model #: \_\_\_\_\_ Serial #: \_\_\_\_\_  
Value: \_\_\_\_\_ Date purchased: \_\_\_\_\_  
Where purchased: \_\_\_\_\_ Location (kitchen,bedroom,etc): \_\_\_\_\_  
Description: \_\_\_\_\_

Owner Name: \_\_\_\_\_  
Brand Name: \_\_\_\_\_  
Model #: \_\_\_\_\_  
Value: \_\_\_\_\_  
Where purchased: \_\_\_\_\_  
Description: \_\_\_\_\_

Item (tv,radio,jewelry etc): \_\_\_\_\_  
Make: \_\_\_\_\_  
Serial #: \_\_\_\_\_  
Date purchased: \_\_\_\_\_  
Location (kitchen,bedroom,etc): \_\_\_\_\_

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Owner Name: \_\_\_\_\_  
Brand Name: \_\_\_\_\_  
Model #: \_\_\_\_\_  
Value: \_\_\_\_\_  
Where purchased: \_\_\_\_\_  
Description: \_\_\_\_\_

Item (tv,radio,jewelry etc): \_\_\_\_\_  
Make: \_\_\_\_\_  
Serial #: \_\_\_\_\_  
Date purchased: \_\_\_\_\_  
Location (kitchen,bedroom,etc): \_\_\_\_\_

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Item (tv,radio,jewelry etc): \_\_\_\_\_  
Make: \_\_\_\_\_  
Serial #: \_\_\_\_\_  
Date purchased: \_\_\_\_\_  
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Where purchased: \_\_\_\_\_  
Description: \_\_\_\_\_

Item (tv,radio,jewelry etc): \_\_\_\_\_  
Make: \_\_\_\_\_  
Serial #: \_\_\_\_\_  
Date purchased: \_\_\_\_\_  
Location (kitchen,bedroom,etc): \_\_\_\_\_