

CONNECTICUT MILITARY DEPARTMENT

INSTRUCTIONS FOR REPORT OF FINANCIAL LIABILITY

PURPOSE: To officially report the facts and circumstances supporting the assessment of financial charges for the loss, damage, or destruction of state-controlled property.

AUTHORITY: Paragraph 6 of CTMD General Order 2018-3.

INSTRUCTIONS:

UNIT/SECTION INFORMATION: Provide the name and location of your organization into which the property was assigned.

ITEM INFORMATION: Provide a brief description of the state-owned property as well as the name of the manufacturer, model, serial number and state tag number. Provide the date the item was acquired by the organization

INVESTIGATING OFFICER: A Report of Unaccounted Property (CTMD Form 4-5) must be completed if the Hand Receipt Holder is available to provide their actions taken to protect, locate and recover the item(s). In the event the Hand Receipt Holder is unavailable, the investigating officer must provide substantiating comments regarding the circumstances as to why they are unavailable. If negligence or abuse is evident or suspected, the investigating officer must provide comments substantiating the claim.

Example 1: "Individual failed to properly secure item despite being instructed to do so by chain of command"

Example 2: "Individual has refused to turn in assigned uniforms/equipment as required" In the comments section, the Investigating Officer must provide details of their investigation and provide recommendations for corrective action, to include their assessment of the Hand Receipt Holder's liability.

APPOINTING AUTHORITY: The Appointing Authority is the first person in the chain of command who has command authority over the Hand Receipt Holder. For example, the Commandant of the unit for members of the Governor's Foot & Horse Guard. The Appointing Authority will approve or disapprove the Investigating Officer's recommendations and provide appropriate comments or rationale for that decision.

APPROVING AUTHORITY: The Approving Authority is the direct supervisor of the Appointing Authority. For example, if the Commandant is the Appointing Authority, the Assistant Adjutant General is the Approving Authority. The Approving Authority will approve or disapprove the Investigating Officer's recommendations and provide appropriate comments or rationale for that decision. If approved, a Financial Liability Officer will be appointed on appointment orders by the Approving Authority.

FINANCIAL LIABILITY OFFICER: The Financial Liability Officer will provide their comments and recommendations and will provide a dollar amount of the loss based on the item's initial cost, its replacement cost and reasonable depreciation or appreciation of the item. The Financial Liability Officer will also determine who is financially liable for the loss, if any and the percentage of that financial liability.

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INDIVIDUAL CHARGED: The Individual Charged must be afforded the opportunity to rebut the findings and recommendations made by all parties. In the event the Individual Charged is unavailable, three attempts must be made to contact the individual. All attempts can be performed on the same day.

1. By Phone – Note the date and the number called.
2. By E-Mail – Provide the date of the e-mail and the e-mail address it was sent to. Print out a copy of the sent e-mail and attach to this document.
3. By Certified Mail – Provide a copy of the certified mail receipt that includes the tracking number and attach to this document.

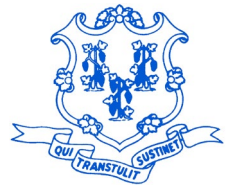
FINAL DISPOSITION BY FINANCIAL LIABILITY OFFICER: Based upon any new information or evidence provided by the Individual Charged, the Financial Liability Officer will make any adjustments, if any.

CTMD FISCAL BUSINESS OFFICE: Once the recommendation is approved and complete, the Financial Liability Officer will forward this form and all substantiating documentation to the CTMD Fiscal Business Office to process invoicing and receiving payment from the Individual Charged.

SEND THIS FORM & SUPPORTING DOCUMENTATION TO:

Connecticut Military Department
Fiscal Business Office
360 Broad Street Room #219
Hartford, Connecticut, 06105-3706
(860) 548-3247 (fax)

CONNECTICUT MILITARY DEPARTMENT
REPORT OF FINANCIAL LIABILITY



UNIT/SECTION INFORMATION:				
Organization:			Location:	
ITEM INFORMATION:				
Item Description			Date Loss Discovered	
Manufacturer	Model	Serial Number	State TAG Number	Date Acquired
INVESTIGATING OFFICER				
Was a Report of Unaccounted Property Completed		Negligence or abuse evident or suspected:		
Yes	No (provide comments)	Yes	No	
Comments/Recommendations:				
Printed Name		Signature	Date	
APPOINTING AUTHORITY:				
Recommendation		Comments/Rationale		
<p align="center">Approve</p> <p align="center">Disapprove</p>				
Printed Name/Rank		Signature	Date	
APPROVING AUTHORITY:				
Recommendation		Comments/Rationale		
<p align="center">Approve</p> <p align="center">Disapprove</p>				
Printed Name		Signature	Date	

CONNECTICUT MILITARY DEPARTMENT
REPORT OF FINANCIAL LIABILITY



FINANCIAL LIABILITY OFFICER:

Findings and Recommendations

Dollar Amount of Loss	Recommended Financial Liability	Percentage of Responsibility
Printed Name	Signature	Date

INDIVIDUAL CHARGED:

I have examined the findings and recommendations of the financial liability officer and

Submit the attached statement of objection
 Do not intend to make such a statement

I have been informed of my right to legal advice. My signature is not an admission of liability

Printed Name	Signature	Date
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Individual refused/failed to respond

Date and phone number called
 Date and e-mail sent (attach e-mail)
 Date certified mail sent (attach USPS certified mail receipt)

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FINAL DISPOSITION BY FINANCIAL LIABILITY OFFICER:

No change
Change in Dollar Amount Loss to:
Change in Recommended Financial Liability to:
Change in Percentage of Responsibility to:

Printed Name	Signature	Date
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CTMD FISCAL BUSINESS OFFICE

Date Invoice Sent	Invoice Number	Invoice Amount
Printed Name	Signature	Date
Date Payment Received	Financial Institution	Check Number