





**Mississippi Forestry Commission**  
(Certificate of Member Responsible for Occurrence)

**Certificate And Recommendations Of Office In Charge**

After personal investigation, I certify the statement on page 1 of this report to be true to the best of my knowledge and belief and that the loss of the herein described property was or was not due to negligence or carelessness.

It is recommended the member responsible be relieved of accountability.

It is recommended the member responsible be charged the present value of the property, estimated to me to be \$\_\_\_\_\_.

Further explanation deemed necessary to be made here:

Signature

Service Forester

Date

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**Decision of Reviewing Officer**

It is recommended that the member accountable for the property listed on the reverse side be relieved of/ charged with responsibility for loss. Value at time of loss, \$\_\_\_\_\_.

Signature

Title

Date

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**Certificate of Payment**

I certify that the sum of \$\_\_\_\_\_ has been received in payment for the property described on page 1 of this report.

Business Director

Date

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**Certificate of Adjustment of Record**

I certify that in compliance with the reviewing officer's decision, the necessary entries have been made on the property records.

Property Control Officer

Date

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**Remarks**