The UNC Policy Manual 300.8.4[G] Adopted 08/05/77

# Guideline on Reporting Misuse of State Property by State Employees

North Carolina General Statute § 114-15.1 creates an obligation on State employees who are informed of or have evidence of misuse of State property by a State employee to report that information within three (3) days to the reporting employee's immediate supervisor. The statute further specifies that the information must then be reported to the immediate supervisor's institutional head, and, in turn, within ten (10) days, to the director of the State Bureau of Investigation. Misuse includes such offenses as arson, attempted arson, damage of, theft from, or theft of, or embezzlement from, or embezzlement or otherwise misuse of any State-owned personal or real property.

Each chancellor is appointed to function as institutional head as contemplated under N.C.G.S. § 114-15.1.

The President's office will administer N.C.G.S. § 114-15.1 with respect to General Administration.

Attached is a form for submitting written reports to the SBI. The SBI also requests, that in addition to the written report, immediate telephone notification be made to SBI headquarters (919-733-4311) as soon as such information is available. A copy of any report made by local law enforcement authorities relating to the offense should be forwarded to the SBI.

[This is a rewrite of Administrative Memorandum #84.]

## STATE PROPERTY MISUSE-REPORT TO S.B.I.

(SUBMIT IN DUPLICATE. AS REQUIRED BY G.S. 114-15.1, FORM FOR USE BY DEPARTMENT HEAD TO REPORT INFORMATION OR EVIDENCE OF AN ATTEMPTED ARSON, OR ARSON, DAMAGE OF, THEFT FROM, OR THEFT OF, OR EMBEZZLEMENT FROM, OR EMBEZZLEMENT OF, OR MISUSE OF ANY STATE-OWNED PERSONAL PROPERTY, BUILDINGS, OR OTHER REAL PROPERTY.)

Department:		Div/Instit/Agency:
Address:		Tel.#:
Employee Reporting Info:		Bus. Tel.#:
Type of Crime:		Property Attacked:
Date of Crime:	Time:	City & County:
Description of Crime:		

### STOLEN/DAMAGED PROPERTY:

[	(QUANTITY)	(ITEMS)	(EQUIP. #)	(SERIAL #)	(MODEL)	(COLOR)	(SIZE)	(VALUE)
1.								
2.								
3.								
4.								

## SUSPECTS:

Name:	Race:	Sex:	Age:	Add:
Name:	Race:	Sex:	Age:	Add:
Name:	Race:	Sex:	Age:	Add:
			·	

(If reported to Local Authorities:	Department:	Date:
	(Attach copy of Local Authorities' Report)	

(DATE OF REPORT)

(DEPARTMENT HEAD)

### FOR SBI USE

SBI File #:		

Date Report Received:\_\_\_\_\_

 Filed with no Bureau Action.	Info. copy sent to	District on

\_\_\_\_\_\_ Referred to \_\_\_\_\_\_ District for investigation on

Case handled by local Department

Case referred to \_\_\_\_\_ Dept. for administrative action on

Other (Specify):

(DATE)

(AGENT)