

TO: The Adjutant General N.J. Department of Military & Veterans Affairs ATTN: Command Logistics Office (CLO) Trenton, N.J. 08625-0340	FROM:
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SECTION I - (COMPLETE THIS SECTION ONLY WHEN REPORTING A VEHICULAR ACCIDENT)

GOVT VEHICLE	MAKE & TYPE	NAME OF OPERATOR, PASSENGER(S) (For govt pers, show Service No. & Grade)	ADDRESS(ES) (For govt pers, show organization)
	LICENSE NO OR GOVT SERVICE NO.		
OTHER VEHICLES	MAKE & TYPE	NAME OF OPERATOR, OWNER, PASSENGER(S) (For govt pers, show Service No. & Grade)	ADDRESS(ES)(For govt pers, show organization)
	LICENSE NO.		

SECTION II - (COMPLETE THIS SECTION WHEN REPORTING ANY INCIDENT OR ACCIDENT)

NATURE OF INCIDENT (**EXAMPLES:** Auto accident, damage to real estate, casualty, etc)

PLACE OF INCIDENT	DATE OF INCIDENT
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PERSONAL INJURIES OR DEATH	EXTENT OF PERSONAL INJURY, IF ANY (check one) <input type="checkbox"/> EXTENSIVE <input type="checkbox"/> MODERATE <input type="checkbox"/> NONE	NAME OF PERSON(S) INJURED, KILLED, PROPERTY DAMAGED (For govt pers, show Service No. & Grade for property, show serial no or govt service no.)	ADDRESS(ES) (For govt pers, show organization)
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NAME & ADDRESS OF PERSON(S) INVOLVED & WITNESS(ES). NAME & LOCATION OF PROPERTY INVOLVED (For govt pers, show SN, grade, & orgs for govt property, show govt service no or serial no)

BRIEF SUMMARY OF FACTS (include sufficient details of mission of govt pers and material to indicate official or unauthorized use. ARNGUS unit should include date as to whether incident was generated by activities of pers employed as caretaker of Federal property or by activities of any state pers performing a Federal function of the U.S. Army) (**Also include approximation of damages to private and government property and names and addresses of potential claimants.**)

TYPED NAME AND TITLE OF REPORTING OFFICIAL	SIGNATURE
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