PERSONAL BELONGINGS INVENTORY LIST

CCFFHs do not have to use samples/examples provided by CTA. However, any CCFFH may use this sample policy/form to comply with current regulations. CCFFHs are not required by CTA to utilize this specific form and may develop their own. CCFFHs may develop their own policies, make their own forms or alter any CTA sample in order to meet their individual business needs.

CTA samples are not written to comply with any legal requirements as they pertain to liability or any other required Federal or State laws or regulations. They are written only to comply with current Hawaii Administrative Rules (HAR) under HAR §11-800 as of October 01, 2021.

CTA provided samples are not inclusive to any other legal needs a CCFFH may have in their operations. It is suggested CCFFHs seek legal consultation for any specific need, particular to their circumstance, to ensure any item is legal and binding and does not violate any federal or state laws.

PERSONAL BELONGINGS INVENTORY LIST

Use additional sheets as necessary to list all belongings

Name of Client: _____ Date Admitted to CCFFH: _____

Clothing	No. of Items	Item(s) Lost/Damaged/Removed	Date	Initials
Socks/stockings				
Underpants				
Bras				
Pants				
Shorts				
Skirts				
Shirts/blouses				
Dresses				
Jackets				
Jewelry				
Rings	4			
Necklaces				
Pins				
Bracelets				
Watches				
Adaptive Equipment				
Eyeglasses				
Dentures				
Hearing Aids				
Wheelchair				
Cane/walker				
Furniture				
TV/Radio/CD or DVD				
Bed				
Recliner etc.				
Cellphone				
Items After Admission				

Primary Caregiver Signature:

Client/Legal Representative:

Date:

Date: