



(Name) \_\_\_\_\_ (Rank) \_\_\_\_\_ (Social Security Number) \_\_\_\_\_ DJ: \_\_\_\_\_ (File Number) \_\_\_\_\_

# DECEASED

RECEIVED FROM: \_\_\_\_\_

DATE: \_\_\_\_\_

CARRIER: \_\_\_\_\_

GBL NO: \_\_\_\_\_

PCS: \_\_\_\_\_

WT: \_\_\_\_\_

CU: \_\_\_\_\_

SHIPPED FROM: \_\_\_\_\_

DATE: \_\_\_\_\_

CARRIER: \_\_\_\_\_

GBL NO: \_\_\_\_\_

PCS: \_\_\_\_\_

WT: \_\_\_\_\_

CU: \_\_\_\_\_

NOK LTR SENT: \_\_\_\_\_

NOK LTR REC: \_\_\_\_\_

DD FORM 1300 REC: \_\_\_\_\_

DECEASED CASE FILE

MCAGCC29P -4610/9 (1-89)