

INTERMENT RECORD - INSTALLATION CEMETERY

1. NAME OF DECEASED <i>(Last, First, Middle Initial)</i>	2. GRADE	3. SERVICE NO. & SSN
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4. NAME AND LOCATION OF CEMETERY	5. GRAVE SITE		
	A. PLOT NUMBER/ROW NUMBER	B. GRAVE NUMBER	C. DEPTH OF BURIAL SITE

6. AUTHORITY FOR INTERMENT *(Cite applicable paragraph from AFI 34-501)*

7. DATE OF DEATH	8. DATE OF INTERMENT	9. DATE OF BIRTH	10. BRANCH OF SERVICE	11. RELATION TO SPONSOR
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12. PERSON DIRECTING DISPOSITION OF REMAINS		
A. NAME	B. GRADE	C. ADDRESS <i>(Include Zip Code)</i>

REMARKS

DATE	SIGNATURE OF PERSON AUTHORIZING INTERMENT
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