

MORTUARY GUIDE

(To be completed by a Department of the Air Force Mortuary Officer)

Authority: 10 U.S.C 9013, Secretary of the Air Force; E.O 9397 (SSN), as amended.

Purpose: The Mortuary Guide form is designed for collection of Personally Identifiable Information (PII) and other pertinent information for mortuary cases to streamline the care delivered.

Routine use: Information may be disclosed outside of the DoD as necessary to provide mortuary care services to the Next of Kin, such as travel arrangements; or in accordance with DoD Blanket Routine Use provisions.

Disclosure: Disclosure is voluntary. However, failure to provide the requested information may result in mortuary care services not being available to the next of kin and family.

AF SORNs: A0600-8-1c AHRC DoD

SECTION I - DECEASED INFORMATION

ELIGIBILITY CATEGORY	BoS	DD	RANK	GRADE	DCIPS NUMBER	ANC NUMBER
NAME OF DECEASED (LAST, FIRST, MI)			POSTHUMOUS PROMOTION		AERO RATING	
PLACE OF BIRTH			GRADE		MARITAL STATUS	
DATE OF BIRTH			SSN			
PLACE OF DEATH			DATE OF DEATH		CAUSE OF DEATH	
			CATEGORY			
HOME INSTALLATION			RELIGION			

SECTION II - PADD/PNOK/FAMILY INFORMATION

PADD	RELATIONSHIP	NAME (LAST, FIRST MI)	ADDRESS (Include zip code)			
	DOB	SSN	PHONE NUMBER		EMAIL ADDRESS	
PNOK	RELATIONSHIP	NAME (LAST, FIRST MI)	ADDRESS (Include zip code)			
	DOB	SSN	PHONE NUMBER		EMAIL ADDRESS	
PERE	RELATIONSHIP	NAME (LAST, FIRST MI)	ADDRESS (Include zip code)			
	DOB	SSN	PHONE NUMBER		EMAIL ADDRESS	

SECTION III - DISPOSITION INSTRUCTIONS

REQUIRED FORMS

DD FORM 3045	DD FORM 3046	FAQ FORM		AUTOPSY REQUEST FORM		SHIPPING REQ
UPLOADED IN DCIPS	UPLOADED IN DCIPS	UPLOADED IN DCIPS	UPLOADED IN DCIPS	UPLOADED IN DCIPS	UPLOADED IN DCIPS	
	BY WHOM	DATE	UPLOADED IN AFMETS	DATE	CREMATION LETTER PROVIDED TO FUNERAL HOME	
PERMISSION TO CREMATE						
CASKET TYPES			URN SELECTION		QA ON ETCHING	
OCCUPATIONAL BADGES REQUESTED			TYPE OF BADGE/S			
FLYOVER ELIGIBLE?		FLYOVER REQUESTED?		DECISION		
REQUESTED BY		FLYOVER PERFORMED BY				
FUNERAL HOME NAME			ADDRESS (Include zip code)			
TELEPHONE			EMAIL			
FUNERAL HOME POC						
CEMETERY NAME			ADDRESS (Include zip code)			
TELEPHONE			EMAIL			
CEMETERY POC						
ARRANGED RELEASE OF REMAINS TO PREPARING FUNERAL HOME			OBTAIN AND DELIVER CLOTHING AND ACCOUTREMENTS TO FUNERAL HOME			
PRE-INSPECTION OF REMAINS			MILITARY HONORS REQUESTED			
REMAINS CLOTHED AND CASKETED			CHAPLAIN REQUESTED			
INSPECT CASKET AND SHIPPING CASE			DD FORM 2062 COMPLETED			
ORDERED DEATH CERTIFICATES			DD FORM 2063 COMPLETED			
PROVIDED DEATH CERTIFICATES TO			FINAL INSPECTION OF REMAINS			

SECTION IV - TRAVELERS INFORMATION (Use the Additional Travelers Section as Necessary)						
NAME OF TRAVELER	SSN		ADDRESS (Include zip code)			
EMAIL ADDRESS	DOB		DEPARTURE AIRPORT	RENTAL CAR	TOTAL COST	
TRAVEL PREFERENCE OBTAINED	TRAVEL ARRANGEMENTS REQUESTED		TRAVELER'S TICKET PROVIDED		DD FORM 1351-2 FORWARDED TO FINANCE	
SECTION V - TRANSPORTATION FOR ESCORT AND REMAINS						
DATE OF REQUEST	TIME OF REQUEST		MODE OF SHIPMENT			
NAME OF ESCORT (LAST, FIRST, MI)	RANK	SSN	HOME INSTALLATION AND ORGANIZATION			
ESCORT BRIEFED AND FURNISHED						
DD FORM 1351-2	AF FORM 1947 ESCORT REPORT					
VA FORM 40-1330	ESCORT PAMPHLET					
SECTION VI - NOTIFICATION OF TRANSPORTATION SCHEDULE FOR MOVEMENT OF REMAINS						
FURNISHED TO	DATE	TIME	FURNISHED TO	DATE	TIME	
PADD			FSS SQUADRON (RECEIVING INSTALLATION)			
PNOK			USO REPRESENTATIVES (AIRPORT LOCATIONS)			
AFMAO			AIRPORT SECURITY/TSA/SHERIFF DEPT			
DoDMORTUARY			SUPPLEMENTAL DEATH MESSAGE			
ANC PROTOCOL	FLIGHT SCHEDULE					
RECEIVING FUNERAL HOME			DEPARTURE LOCATION	AIRLINE/FLIGHT #	DEPARTURE DATE	DEPARTURE TIME
CEMETERY						
BASE PROVIDING HONORS			ARRIVAL DESTINATION	AIRLINE/FLIGHT #	ARRIVAL DATE	ARRIVAL TIME
DIGNIFIED ARRIVAL HONOR GUARD						
SECTION VII - PRIMARY EXPENSE PAYMENTS - CONTRACT FUNERAL HOME						
	DATE	TIME		DATE	TIME	
RECEIVED INVOICES FROM CONTRACT FUNERAL HOME			PAPERWORK SENT TO FINANCE			
PROCESSED PRIMARY EXPENSES			FUNERAL BILL PAID NOTICE			
	AMOUNT	DATE		AMOUNT	DATE	
AMOUNT PAID FOR CASKET			AMOUNT PAID FOR ALL PRIMARY EXPENSES			
AMOUNT PAID FOR URN						
SECTION VIII - INFORMATION OR ITEMS FURNISHED TO PREPARING FUNERAL HOME AND/OR RECEIVING FUNERAL HOME						
	DATE	TIME		DATE	TIME	
ITINERARY OF REMAINS TO RECEIVING FUNERAL HOME			SHIPPED INTERMENT FLAGS/FLAG CASES TO RECEIVING FUNERAL HOME			
LETTER TO RECEIVING FUNERAL HOME			PERSONAL EFFECTS (DD Form 1076 DOCUMENTED)			
CLOTHING REQUESTED						
SECTION IX - SECONDARY EXPENSE PAYMENTS - RECEIVING FUNERAL HOME AND / OR CEMETERY						
	DATE	TIME		DATE	TIME	
DD FORM 1375 SIGNED BY PADD AT RECEIVING FUNERAL HOME			COMPLETED PAYMENT UPLOADED IN DCIPS			
RECEIVED RECEIPTS FROM PADD			RECEIVED PAID NOTICE FROM FINANCE			
RECEIVED ITEMIZED BILL FROM FUNERAL HOME						
RECEIVED ITEMIZED BILL FROM CEMETERY			MAXIMUM ALLOWABLE SECONDARY PAYMENTS			
PREPARED SF 1034				AMOUNT	DATE	
PROCESSED FUNERAL INVOICES			AMOUNT PAID FOR SECONDARY EXPENSES			
SUBMITTED COMPLETED PAYMENT TO FINANCE			AMOUNT PADD PAID FOR CHARGES EXCEEDING CHARGES			
SECTION X - HONORS AND FLAGS RECIPIENTS						
	DATE	TIME	Use only if "Denial of Honors" package is Appropriate	DATE	TIME	
HONORS REQUESTED BY PADD			DENIAL OF HONORS (DOH) PACKAGE STARTED			
HONORS RENDERED			PADD BRIEFED ON DOH PROCESS			
HONORS RENDERED BY			DOH PACKAGE SENT TO A1S FOR DECISION			
			LETTERS SENT TO PADD ON DECISION FROM A1S			
			MORTUARY OFFICER NOTIFY PADD OF DECISION			
			DOH PACKAGE SENT TO AFMAO			
FLAGS PRESENTED TO	CATEGORY	DATE	PRESENTED WHERE	BY WHOM	TIME	

SECTION XI- SUMMARY COURT OFFICER APPOINTED TO HANDLE PERSONAL PROPERTY				
NAME (LAST, FIRST, MI)	RANK	UNIT ASSIGNED TO	DATE ASSIGNED	DUTY PHONE
	DATE			DATE
SUMMARY COURT OFFICER APPOINTED ON ORDERS		INITIAL CONTACT WITH PERE		
BRIEFED ON PROPERTY DISPOSITION		ESTIMATED DATE OF ARRIVAL AT DESTINATION		
CONTACT JPED FOR PERSONAL PROPERTY		PROVIDE JPED LETTER WITH PERE DECISION		
VERIFY SHIPMENT REQUEST FROM PERE		CONFIRM DELIVERY DATE OF PERSONAL EFFECTS		
PROPERTY ACTION TO BE COMPLETED		DATE PROPERTY SHIPPED		
DATE ACTION TAKEN TO SECURE PROPERTY		CASE CLOSED AND RECORD FILE COMPLETED		
SECTION XII - FAMILY ASSISTANCE REPRESENTATIVE (FAR)				
NAME (LAST, FIRST, MI)	RANK	UNIT ASSIGNED TO	MOBILE PHONE	
	DATE			DATE
REQUESTED FAR FROM UNIT CC		FAR APPOINTED ON ORDERS		
BRIEFED FAR ON DUTIES/RESPONSIBILITIES		FAR INITIAL CONTACT WITH PADD/PNOK		
FAR DATE OF ARRIVAL AT DESTINATION		DATE FAR RETURNED TO UNIT		
FAR COMPLETION OF DUTIES LETTER SENT TO PADD/PNOK		RECEIVED FAR AFTER ACTION REPORT/LOG OF EVENTS		
ADDITIONAL TRAVELERS				
DEATH CERTIFICATE RECIPIENTS (Please add the following: Name/Relationship to Deceased/Date Requested/Date Provided)				
SECTION - NOTES				
MORTUARY OFFICER (Last, First MI)		MORTUARY OFFICER SIGNATURE		DATE