Information Sheet - Report of Death of An American Citizen Abroad (DS-2060)

Please PRINT or TYPE your information

1. Full name of deceased American citizen: _____
   Date of birth: Month: _____Day: _____Year: _____
   Place of birth: _____ SSN: _____
   Marital status _____ (Single/married/widowed/divorced)
   Date of death: Month: _____Day: _____Year: _____ Time: _____
   Place of death: _____
   Passport No.: _____ Issuance date: _____ Issuance place:_____
   Address: Taiwan_____
   U.S._____
   Cause of death, as it appears on the death certificate: _____
   _____

2. Disposition of the remains:
   ( ) Local Cremation – Date: _____ Place: _____
   ( ) Local Burial- Date: _____ Place: _____
   ( ) Remains to be shipped to U.S. for disposition

3. Disposition of the effects: Name: _____Relationship: _____
   Address: _____

4. Travel/residing abroad with relatives or friends:
   Name of Relatives or friends: _____
   Address: _____

5. Report sent to: Name:_____ Relationship: _____
   Address: _____

6. Name of Next of Kin(NOK): _____
   Relationship with Deceased: _____ NOK SSN:_____
   Address_____
   Contact information: Tel/Mobile: _____
   Fax _____ E-mail: _____

Additional information: _____
_____

The above information was provided by:
Name: _____Tel/Mobile: _____
Date:_____