

INFORMATION QUESTIONNAIRE For The Consular Report Of The Death Of A U.S. Citizen Abroad

- Full name of the deceased: _____ Date of Birth: _____
- Last U.S. address (if applicable): _____
- Address Abroad: _____ **Permanent** or **Temporary** (please circle one)
- *Date of Death:* _____ Social Security Number (if known): _____
- Disposition of the remains: _____
- Location of Interment (if applicable): _____
- Person in possession of the deceased's belongings at the time of the death:
_____ Relationship: _____
- Name/address of person responsible for custody of personal effects and accounting thereafter:
_____ Relationship: _____
- Traveling/residing abroad with relatives or friends as follows:
_____ **Travel; Residing; Visiting** (please circle one)
- Address where copies of the Report of Death should be sent to **Next of Kin** (i.e. spouse, child or surviving parent, else a sibling) :

_____ Relationship: _____
- Number of copies of report requested:
_____ *(Please Note: a minimum of 6 and a maximum of 20 can be provided at no cost)*

THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF:

Signature: _____

Name (printed): _____

Relationship to the deceased: _____

Address: _____

Telephone number(s): _____ Email address: _____