

ESCORT REPORT		DATE
I. TO BE COMPLETED BY MORTUARY OFFICER		
INSTRUCTIONS: The Escort will complete Part II upon his return to home station and deliver mail to the Mortuary Officer of shipping installation.		
1. TO: <i>(Military Activity to which this report should be sent, Attn: Mortuary Officer)</i>		
2. NAME OF DECEASED <i>(Last, First, Middle)</i>	3. GRADE	4. SSAN
5. RECEIVING FUNERAL DIRECTOR <i>(Name & Address, Include Zip Code)</i>		
6. NAME OF NEXT OF KIN		7. RELATIONSHIP TO DECEASED
II. TO BE COMPLETED BY ESCORT		
8. REMARKS <i>(Write narrative report including detailed information if any difficulties were experienced or any critical remarks made about the Air Force in connection with the shipment of remains, the funeral, Military Honors, or related matters. Continue on reverse, if necessary.)</i>		
7. RELATIONSHIP TO		
9. DATE	TYPE NAME, GRADE & BASE OF ESCORT	SIGNATURE OF ESCORT
10. DATE	SIGNATURE OF MORTUARY OFFICER	