Yukon-Kuskokwim HEALTH CORPORATION

Disposition Of Body

Receipt of Body at the Morgue

The Body of: _____ Village: _____

Date: _____ Time: _____ ☐ a.m. ☐ p.m.

Next Of Kin: _____ Phone: _____

Next of Kin Notified: ☐ Yes ☐ No _____

Coroner's Case: ☐ Yes ☐ No _____

Is Body Viewable: ☐ Yes ☐ No (Viewing Requires Family Consent)

Transit Burial Permit: ☐ Yes ☐ No _____

Comments: _____

_____

_____

_____ _____

Signature of person bringing body *Title*

_____ _____

Signature of person receiving body *Title*

Certificate Of Removal

Date: _____ Time: _____ ☐ a.m. ☐ p.m.

Body Being Released To Law Enforcement & Sent To: _____

For: _____

Body Being Released To Family & Sent To: _____

For: _____

_____ _____

*Signature of Person Releasing Body** *Title*

_____ _____

Signature of Person Taking Body *Title*

**Please Call Housekeeping To Clean Morgue*

Revised 4-6-06 By MC, LMSW