

Place of disaster:

PM No:

Nature of disaster:

Date of disaster:
 Day:
 Month:
 Year:

Male: ☐
 Female: ☐
 Other: ☐
 Unknown: ☐

a = Data not available

b = Attachment

c = Further info on page Sup. Info. (700's)

835 APPENDIX BODY SKETCH (for optional use)

