

FAX SHEET – CONSULAR NOTIFICATION

SUBJECT:

NOTIFICATION OF DEATH, SERIOUS INJURY OR ILLNESS OF A NATIONAL OF YOUR COUNTRY

DATE/TIME: _____

TO: Embassy/Consulate of _____ in _____, _____
(COUNTRY) (CITY) (STATE)

FROM:

Name/Office _____

Address _____

City _____ State _____ Zip Code _____

Telephone (_____) _____ Fax (_____) _____

The following individual, who we understand is a national of your country:

*has died, was seriously injured, **OR** is seriously ill within our jurisdiction.*

(CIRCLE ONE)

Name: _____

Date of Birth/Place of Birth: _____

Nationality/Country: _____

Passport Issuing Nation: _____

Passport Number: _____

Date of Death: _____ Place of Death: _____

Apparent Cause of Death: _____

For more information, **please call** _____ between the hours of _____.

Please refer to **case number** _____ when you call.

ADDITIONAL INFORMATION: