

Enclosure 7  
CASUALTY REPORTING EXAMPLES

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## Personnel Casualty Report Message

When notified of a Personnel Casualty, IMMEDIATELY call Flag Plot at (202) 267-2100.  
Send this message within 4 hours of notification.

*MESSAGE ROUTING TO REPORT AN ACTIVE DUTY, RESERVE, OR AUXILIARY DEATH, OR THE DEATH OF A MEMBER WHO DIED WITHIN 120 DAYS OF SEPARATION:*

P 000000Z MON YR (COMCEN enters date time group)  
FM COGARD UNIT ANYWHERE US (unit where casualty occurs or is initially reported to)  
TO CCGDNUMBER ANYWHERE US (district where Next Of Kin resides)  
COGARD INTSUPRTCOM ANYWHERE USA (ISC where Next Of Kin resides)  
CCGDNUMBER ANYWHERE US (district where member's unit is located, if different from "To" line)  
COGARD INTSUPRTCOM ANYWHERE USA (ISC where casualty occurs)  
COGARD UNIT ANYWHERE US (member's unit, if different than "From" line)  
COMDT COGARD WASHINGTON DC//G-WPM/G-WKW/G-O-CGIS// (Omit G-O-CGIS when death occurs in a hospital due to natural causes)  
INFO COGARD PSC TOPEKA KS  
COMCOGARD PERSCOM WASHINGTON DC//EPM or OPM//  
FHTNC NORFOLK VA (Fleet Home Town News Center)  
CCGDNUMBER ANYWHERE US (district where unit sending this msg is located, if different from above)  
COGARD MLC ANYWHERE US (if member's unit was a MLC unit)  
COGARD MLC LANT NORFOLK VA //KSE//  
  
COMCOGARD TISCOM//HONOR GUARD OPS//

*MESSAGE ROUTING TO REPORT A DEPENDENT DEATH*

P 000000Z MON YR (COMCEN enters date time group)  
FM COGARD UNIT ANYWHERE US (unit where casualty occurs or is initially reported to)  
TO COMDT COGARD WASHINGTON DC//G-WPM/G-WKW//  
COGARD INTSUPRTCOM ANYWHERE USA (ISC where member resides)  
INFO COGARD PSC TOPEKA KS

*MESSAGE ROUTING TO REPORT A RETIREE DEATH*

P 000000Z MON YR (COMCEN enters date time group)  
FM COGARD UNIT ANYWHERE US (unit where casualty occurs or is initially reported to)  
TO COGARD PSC TOPEKA KS//RAS//  
INFO COMDT COGARD WASHINGTON DC//G-WPM//

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## Personnel Casualty Report Message, Continued

ACCT CGW2GARC

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UNCLAS FOUO //N01770//

SUBJ: PERSONNEL CASUALTY REPORT

1. THE FOLLOWING INFO IS PROVIDED:

**ALPHA. Name.** Indicate member's full name, rank/rate, SSN, and branch of service. In the case of a dependent's death, first give the dependent's full name and relationship to member, and then give the member's full name, rank/rate, SSN, and branch of service.

**BRAVO. Status.** Indicate person's status, (e.g., active duty, active duty for training (ADT), Inactive Duty for Training (IDT), retired, dependent, absentee since, etc). In the case of reserve members, indicate whether the member was on active duty for training (ADT) or inactive duty for training (IDT), and the period of training authorized including hour and date. If the casualty occurred while traveling to or from training, indicate the time of the member's departure, scheduled arrival time, method of travel, itinerary, and immediate cause of death. Fax a complete copy of the reservist's order immediately to Commandant (G-WPM) @ 202-267-4823.

**CHARLIE. Type of Casualty.** Indicate whether casualty was caused by hostile or non-hostile actions. Also state whether member is Alive, Dead or Missing. If alive give the prognosis in case of illness or injury. If dead, state the cause such as accident, illness, suicide, killed in action, or died of wounds. When applicable, state how identification of remains was established. If missing, give cause of disappearance. Do not use indefinite statements such as "lost overboard" or "missing and presumed dead". If it cannot be determined if member is deceased, see Article 11-A-4, Coast Guard Personnel Manual, COMDTINST M1000.6 (series).

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## Personnel Casualty Report Message, Continued

**DELTA. Date, Time, Place, Circumstances, and Cause.** Give a concise description (avoid gory details) to provide means for explaining the casualty to the family and for processing survivor benefits. Use local time. If the casualty occurred at sea or at a remote area, state latitude and longitude, unless security precludes. If death was caused from injuries, state the cause (i.e. an automobile or plane accident, or other cause.) If possible, give brief additional information to indicate whether or not the injuries were incurred as a result of operational duty, (e.g., accidental electrocution while engaged in repair work aboard ship). If death was caused by gunshot wound, indicate whether accidentally or intentionally caused. If death resulted from drowning, indicate whether due to falling overboard, recreational swimming, etc. If death resulted from flight in a Coast Guard aircraft, report circumstances as follows: status of individual, (e.g., pilot, crewmember, passenger; model of aircraft); and purpose and type of flight, (e.g., whether "operational" or "other than operational"). Whenever a determination of the cause of death is delayed pending an autopsy or toxicological examination, the finding shall be furnished by supplemental message as soon as possible. If the member is missing, include a statement of the status of the search or the impracticability of conducting a search.

**ECHO. Location and Disposition of Remains.** Give complete name, address, and phone number of morgue or funeral establishment where remains are located. If remains are to be transferred to another establishment, give name, address, and phone number of such establishment, when transfer will be made, and any special disposition instructions the next of kin should know. If remains were not recovered, give the status or the search.

**FOXTROT. Full Name, Address, and Relationship of Next of Kin (NOK).** Report NOK information as found on the BAH/Dependency/Emergency Data (CG-4170A). If dependents are injured or killed in the same accident, state their present whereabouts and condition if applicable.

**GOLF. Notification of Next of Kin (NOK).** State Primary NOK – Yes or NO, Secondary NOK – Yes or NO, and the date and local time of contact to indicate whether primary and secondary NOK named on the member's (CG-4170A) have been officially notified. . If notification has not been made, advise what action is being taken to notify next of kin.

**HOTEL. Board of Investigation.** Enter Yes or No to indicates whether a board of investigation will be convened. Consult Administrative Investigations Manual COMDTINST M5830.1

**INDIA. BAH/Dependency/Emergency Data.** Indicate date of current BAH/Dependency/Emergency Data (Direct-Access Report) and CG PSC-2020D (Designation of Beneficiaries) executed by member.

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## Personnel Casualty Report Message, Continued

**JULIETT. Beneficiary for Death Gratuity.** Provide name and address of death gratuity beneficiary, as shown on the member's current Designation of Beneficiaries (CG PSC 2020D). State N/A for spouse and dependent deaths.

**KILO. Line of Duty Determination.** All active duty deaths (illness, disease, accidents, car wrecks, and suicide) are considered to have occurred in the "Line of Duty." State here "Commanding Officer has determined death to be "Line of Duty." Use N/A for spouse and dependent deaths.

**LIMA. Servicemembers' Group Life Insurance (SGLI).** In the case of a member's death, indicate if the member is covered by SGLI, the amount of coverage, and the beneficiary information listed on the member's most recent VA Form SGLV-8286. Also indicate whether the member was in an AWOL status for 31 days or more at the time of the death. In the case of a Spouse's death, indicate if the member had family SGLI coverage and the amount. In the case of a dependent child's death, indicate if the member had SGLI coverage.

**MIKE. Beneficiary for Pay and Allowances.** Indicate name and address of beneficiary listed on Designation of Beneficiaries (CG PSC 2020D) for unpaid pay and allowances. Use N/A for spouse and dependent deaths.

**NOVEMBER. Predeceased or Prior Spouse Cases.** If the member was married, and either (1) the member's spouse predeceased the member, or (2) the member's spouse died in the same accident as the member, or (3) the member is divorced: indicate the member's current marital status, the name of the current spouse, the name of the former spouse(s), and the name of the member's current next of kin. Use N/A for spouse and dependent deaths.

**OSCAR. Identification of a Potential Third Party Claim.** If the member or the member's dependents are injured and receive medical care at Government expense or through TRICARE, **and** it appears that a third party is at fault, identify the third party involved.

2. [Unit POC and Phone #]

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## Next of Kin Notification (NOK)

Coast Guard Policy is to have a Coast Guard member notify the NOK of a deceased member in person. If this is not feasible due to distance, contact state or local police and ask them to notify the NOK. The NOK of a missing or seriously ill member may be notified by phone. Notifications are only made during the hours of 0700 to 2400, unless the NOK may find out through another source. In all situations, notify the NOK by 1) Type out the appropriate letter, listed below, 2) Contact and determine you are talking to the NOK (in person for death, by phone for missing or illness), 3) Move to a private place (Wait until inside the home, if notifying NOK in person or have NOK move to a quiet phone), 4) Read the first paragraph to the NOK, 5) Give or mail the letter to the NOK.

### Death of Member - Letter Used to Notify NOK

Mr. and Mrs. Jerry Jones  
123 Main Street  
Somewhere, CA 95123

Dear Mr. and Mrs. Jones

- 1) I deeply regret to inform you on behalf of the United States Coast Guard that your (specify relationship, rate/rank, SSN) died on (date) at/aboard (place) as a result of (provide a brief description of cause of death). Your (specify relationship) died while in the service of his/her country. Please accept my most heartfelt sympathy in your great loss.
- 2) We hope we can be of assistance to you in your bereavement. We will transport the remains, with an escort, to any place you designate. Also, we will allow you an amount toward funeral and interment expenses not to exceed \$6900, for burial in a private cemetery or \$5,500 if remains are consigned to a funeral director prior to interment in a national cemetery or \$600 dollars if remains are consigned directly to a national cemetery.
3. (Name and Phone # of CACO or DAO) has been assigned to give you every possible assistance.
- 4) Please be assured of the heartfelt sympathy and prayers of your (specify relationship) shipmates. A letter setting forth the circumstances of death will follow.

(Name, rate/rank, and title of unit commanding officer)

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## Next of Kin Notification (NOK), Continued

### Missing - Letter Used to notify NOK

Mr. and Mrs. Jerry Jones  
123 Main Street  
Somewhere, CA 95123

Dear Mr. and Mrs. Jones

- 1) I deeply regret to inform you on behalf of the United States Coast Guard that your (specify relationship, name, rate/rank, SSN) is missing as a result of (provide brief description of the cause and circumstances concerning missing status). The incident in which your (specify relationship) was involved occurred on (date) at (or in the vicinity of) (show location of incident). Your great anxiety in this situation is understood and when further information is available concerning results of the search now in progress you will be promptly notified.
- 2) You may be assured that every effort is being made with personnel and facilities available to locate your (specify relationship).
- 4) 3) (Name and Phone # of CG Contact) has been assigned to give you every possible assistance. Please be assured of the heartfelt sympathy and prayers of your (specify relationship) shipmates at this time of heartache and uncertainty. I join you in prayer for (his/her) eventual recovery alive.

(Name, rate/rank, and title of unit commanding officer)

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## Next of Kin Notification (NOK), Continued

### Critical Injury or Illness - Letter Used to notify NOK

Mr. and Mrs. Jerry Jones  
123 Main Street  
Somewhere, CA 95123

Dear Mr. and Mrs. Jones

- 1) With concern I regret to inform you on behalf of the United States Coast Guard that your (specify relationship, name, rate/rank, SSN) is (critically or seriously ill or injured) as a result of (provide brief description of circumstances of illness or injury). This occurred on (date) at (specify location). Your (specify relationship) is presently hospitalized at/on board (show location of place hospitalized) where you are assured that (he/she) is receiving the best possible medical care. Your great anxiety is understood and when further reports are available concerning (his/her) condition you will be informed.
- 2) (Name and Phone # of CG Contact) has been assigned to give you every possible assistance.
- 3) Please be assured of the heartfelt concern and prayers of your (specify relationship) shipmates at this time of uncertainty. I join you in prayer for his/her speedy recovery.

(Name, rate/rank, and title of unit commanding officer)

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## Next of Kin Notification (NOK), Continued

### **Commanding Officer's Letter to the Next of Kin** (must be written within 48 hours of the member's death)

Mr. and Mrs. Jerry Jones  
123 Main Street  
Somewhere, CA 95123

Dear Mr. and Mrs. Jones

Please accept my deepest sympathy on the death of your (Relationship), (Full Name and Rank of Deceased) and allow me to tell you what we know about the circumstances surrounding (His/her) death. [Provide sufficient facts concerning the casualty, search attempts, medical care, etc. to satisfactorily answer all immediate questions in the minds of the next of kin. See Article 11A-8, Coast Guard Personnel Manual, COMDTINST M1000.6 (series).]

[If member was missing and searches have not located the member's remains, include: "We regret that the extensive search for your (indicate relationship) has met with negative results" or "We regret that the extensive search failed to locate any trace of your (specify relationship)." Do not make any statement concerning termination of any searches.]

If you have any questions or need any assistance, please feel free to contact me at (999) 555-1234.

Sincerely,

M. R. ROBERTS  
Lieutenant, U. S. Coast Guard  
Commanding Officer



## Commanding Officer's Letter Request for Death Determination When Member is Missing and No Conclusive Evidence of Death Exists

1771  
15 May 2002

### MEMORANDUM

From: M. R. Roberts  
CG GP Anywhere

To COMDT (G-L)

Thru: (1) CGD Fourteen (a)  
(2) MLCPAC (I)

Subj: INCONCLUSIVE EVIDENCE OF DEATH

Ref: (a) Coast Guard Personnel Manual, COMDTINST M1000.6 (series) 1.

In accordance with reference (a), a death status determination is requested in the case of (indicate rate/rank, name, SSN, branch of service) who is missing. Remains have not been recovered.

2. [Provide summary of circumstances of disappearance.]

3. [Provide all available details surrounding search efforts, including: the area of the search (latitude and longitude, and distance from nearest land); local conditions (such as depth of water, temperatures, other climatic conditions, and terrain); and extent of searches made.]

4. [Provide a summary of statements of survivors or of other personnel who may have pertinent information concerning the circumstances.]

5. [Provide the commanding officer's opinion and recommendation as to the possibility of survival.]

M. R. Roberts  
CG GP Anywhere

Encl: (1) Supporting documentation

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