

Donor Disposition/Personal Effects (Admission)

Donor Name: _____ Age: _____ Sex: _____

Donor Number: _____ Race: _____ DOB: _____

Clothing (Bag or on donor):

___ Hat ___ Coat ___ Belt ___ Shirt ___ Tie ___ Underwear ___ Shoes ___ Pants ___ Dress

___ Skirt ___ Bra ___ Pajamas ___ Socks ___ Bathrobe ___ Slippers ___ Sweater ___ No Clothing

Belongings: _____

Location of Belongings: ___ With Donor ___ Locker (Number)

Circle all methods of Identification • Driver's License/ID • Next of Kin • Tag/ID Bracelet • Other _____

I, _____ of _____, verified the identity of the Donor as stated above as well as verified his/her personal effects as listed above.

Signature: _____ Date/Time: _____

CORE Staff: _____ Signature: _____

CORE Staff: _____ Signature: _____

***Complete if going to PIMS* Donor Transported from CORE to PIMS**

Company Name: _____ Representative: _____

Signature: _____ Date & Time: _____

Belongings: ___ Yes ___ No If **Yes**, Belongings Placed in Locker # _____

CORE Staff: _____ Signature: _____

CORE Staff: _____ Signature: _____

Donor Transported from PIMS to CORE

Company Name: _____ Representative: _____

Signature: _____ Date & Time: _____

Belongings placed back with Donor: ___ Yes ___ No If **No**, Belongings in Locker # _____

CORE Staff: _____ Signature: _____

CORE Staff: _____ Signature: _____

Donor Disposition/Personal Effects (Discharge)

I, _____ of _____, verify that I received the personal effects as stated above and will transport him/her to _____

Signature: _____ Date/Time: _____

CORE Staff: _____ Signature: _____

CORE Staff: _____ Signature: _____

Original: CORE (White) Livery Discharge (Yellow) Funeral Home (Pink) Livery Admission (Gold)