



## LAXRPD 'FALLEN SOLDIER' DETAIL FORM

(AOA ESCORT/FIELDSIDE HONORS REQUEST INFORMATION)

- **DATE OF REQUEST:** \_\_\_\_\_ **LAXRPD OFCR CONTACTED:** \_\_\_\_\_
- **REQUESTING AGENCY/POINT OF CONTACT (P.O.C.):** \_\_\_\_\_
- **NAME/SERVICE/HOME OF RECORD (FOR 'FALLEN'):** \_\_\_\_\_
  
- **ARRIVAL/DEPARTURE INFO:** (DATE): \_\_\_\_\_ **INC #** \_\_\_\_\_  
(TIME): \_\_\_\_\_
  
- **AIRLINE/AIRCRAFT (A/C) INFO:**  
AIRLINE/TYPE (A/C): \_\_\_\_\_ **FLT#/GATE:** \_\_\_\_\_  
AIRLINE P.O.C.: \_\_\_\_\_ **PHONE NO:** \_\_\_\_\_  
CARGO SUPR: \_\_\_\_\_ **PHONE NO:** \_\_\_\_\_  
RAMP SUPR: \_\_\_\_\_ **PHONE NO:** \_\_\_\_\_
  
- **MILITARY ESCORT ONBOARD AIRCRAFT**  
NAME: \_\_\_\_\_ **PHONE NO:** \_\_\_\_\_
  
- **SERVICE CASUALTY ASSISTANCE OFFICERS (CAO'S) INFO:** (CIRCLE ONE) U.S.A/ U.S.N./ U.S.A.F./ U.S.M.C.  
NAME/RANK: \_\_\_\_\_ **PHONE NO:** \_\_\_\_\_  
NAME/RANK: \_\_\_\_\_ **PHONE NO:** \_\_\_\_\_  
MILT CHAPLIN: \_\_\_\_\_ **PHONE NO:** \_\_\_\_\_  
TYPE OF GOVT TRANSPORT: \_\_\_\_\_
  
- **SERVICE & PALLBEAR'S/ HONOR GUARD ASSIGNED:** \_\_\_\_\_ / \_\_\_\_\_  
OIC'S NAME: \_\_\_\_\_ **PHONE NO:** \_\_\_\_\_  
TYPE OF GOVT TRANSPORT: \_\_\_\_\_
  
- **FAMILY INFO:**  
APPROX NUMBER ATTENDING: \_\_\_\_\_  
NAME: \_\_\_\_\_ **PHONE NO:** \_\_\_\_\_  
CITY OF RESIDENCE: \_\_\_\_\_  
TYPE & NO. OF GOVT TRANSPORT PROVIDED: \_\_\_\_\_  
SPECIAL NEEDS/MEDICAL AID: \_\_\_\_\_
  
- **ASSEMBLY LOCATION/ PRE-DETAIL BRIEFING:**  
TIME/DATE: \_\_\_\_\_ **LOCATION:** \_\_\_\_\_





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