

Interim report only Morgue

Book No. E35722

REPORT OF DEATH TO CORONER

SYDNEY WATER POLICE Police Station

10 January, 1990

The Coroner,

GLEBE

SUBJECT: Death of Unidentified Male E 35722 Age 37-30

Marital state _____

Address _____

Time and date of death: Unknown

Place of death: _____

By whom found: Steve BIRD Address: _____, Pendle Hill

By whom reported to Police: Steve BIRD Address: _____, Pendle Hill

By whom last seen alive: _____ Address: _____

When last seen alive: _____

Deceased a native of (County and District): _____

Occupation _____

(If pensioner state type and include whether appropriate authorities informed)

If Military or Invalid pensioner, state disability: _____

Name, address and telephone no. of nearest relative and relationship: _____

Name and address of identifying person: _____

Police present when deceased identified: _____

Did deceased leave a will? _____

By whom burial or cremation is being arranged: _____

Property and clothing found on and with the deceased. (Attach inventory if space insufficient): _____

1 Pair of ~~xx~~ Navy Blue denim jeans

1 Pair of black socks

1 pair of black shoes, lace up.

Miscellaneous Property Book Reference: _____

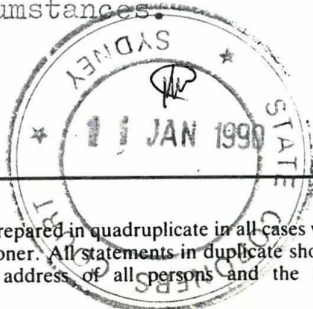
How property and clothing disposed of and on whose authority: _____

Circumstances under which death took place. (If any previous illness, and deceased seen by doctor, particulars should be given. Where treated by a doctor a note should be obtained giving particulars of treatment from such doctor):

At about 9.20am, 10.1.90 information was received via radio channel 13 from the ferry, Freshwater that whilst travelling from Manly to Circular Quay a body of a deceased male was found floating face down off Dobroyd Head. Water Police attended the location recovering the body. He appeared to have no apparent external injuries. He was then conveyed to Sydney Water Police where he was viewed by S/Det Egan-Lee from the Pillage Squad. The body was then conveyed to Royal Prince Alfred Hospital where life was pronounced extinct by Doctors Chan & Chu, then conveyed to the City Morgue. -

Description; Male, approx 30 old, brown hair, blue eyes, medium build, clean shaven, natural teeth, appendix scar.

No suspicious Circumstances.



Signature: L.G. Ford

Rank: Constable 1/c

Annual leave from _____ to _____

(Continued overleaf)

NOTE:

- (1) This form should be prepared in quadruplicate in all cases where a death is reported to the Coroner. The original and two copies should be forwarded to the Coroner. All statements in duplicate should be lodged with the Coroner at least 7 days before the date of the inquest.
- (2) The full name and address of all persons and the registered number of all motor vehicles concerned should be indicated.

POISONING—

- (a) Was death apparently from (i) poison, (ii) drug _____
- (b) Name poison or drug (if known) _____
- (c) Apparently administered by whom? Name: _____ Address: _____
- (d) Date and time ____/____/19____, at _____ a.m./p.m.
- (e) When symptoms first showed ____/____/19____, at _____ a.m./p.m.
- (f) Detail symptoms: _____
- (g) State recently prescribed medicine: _____
- (h) Prescribing Doctor: Name: _____ Address: _____
- (i) When prescribed? ____/____/19____. (j) Quantity prescribed: _____
- (k) How much remains now? _____ (l) Dispensing chemist: _____
- Name and address: _____

GAS POISONING—

- (a) Did gas come from coal-gas supply, brazier, or car? _____
- (b) Where in building was body found? _____
- (c) In what position was body found? _____
- (d) State appliance gas had escaped from: _____
- (e) Was gas still escaping? _____
- (f) If room sealed, how? _____
- (g) Was food being prepared? _____
- (h) Who in Gas Company notified? Name: _____

ELECTROCUTION—

- (a) What had caused shock? _____
- (b) Where in building was body found? _____ (c) Position? _____
- (d) State appliance "shock" received from: _____
- (e) Was appliance still "alive"? _____
- (f) Detail any burns: _____
- (g) Who in Electricity Commission of supplying Authority notified? _____

UNIDENTIFIED CASES (The following information should be furnished)—

Sex, Age, Height, Build, Complexion, Hair, Eyes, Nose, Face: _____

Peculiarities, marks, scars, tattoos, deformities, etc.: _____

What steps have been taken to establish identification (Reference to _____ Department file): _____

REPORT OF INQUEST
(or Magisterial Inquiry)

Date and place of Inquest: _____

Name of Coroner or Magistrate: _____

VERDICT: _____

INQUEST NOT HELD

Inquest disposed of on: _____

By whom: _____

Cause of death: _____

Signature: _____

Rank: _____ Reg'd No. _____

Date: _____

