

# CALIFORNIA PEACE OFFICERS' MEMORIAL FOUNDATION

640 Bercut Drive, Sacramento CA 95811 ♦ www.camemorial.org

## LINE-OF-DUTY DEATH ENROLLMENT FORM

Full Name of Deceased: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Date of Appointment: \_\_\_\_\_

Date of Death: \_\_\_\_\_

Rank at time of death: \_\_\_\_\_

Number of children and age of each: \_\_\_\_\_

Officer's Agency: \_\_\_\_\_

Agency Address: \_\_\_\_\_

Was officer on duty at time of incident?  YES  NO

Circumstances of Death (attach additional pages as needed): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### INCLUDE THE FOLLOWING DOCUMENTATION:

1. Incident report (with narrative)
2. Death Certificate
3. Medical Reports
4. MAIT Report (as applicable)
5. News articles regarding incident/death
6. High resolution officer photograph

<b>PRIMARY SURVIVOR:</b> _____	Relationship to Officer: _____
Address: _____	City/Zip: _____
Email: _____	Phone: _____

OUR AGENCY HAS CONDUCTED A DILIGENT SEARCH AND EXERCISED A GOOD FAITH EFFORT TO VERIFY THAT THE INFORMATION PROVIDED AND ATTACHED HERETO IS TRUE AND CORRECT, AND THAT THIS OFFICER WAS A PEACE OFFICER BY AUTHORITY OF PENAL CODE SECTION 830 ET SEQ. AND DIED IN THE LINE OF DUTY.

<b>CHIEF/SHERIFF:</b> _____	_____
SIGNATURE	PRINT
Address: _____	City/Zip: _____
Email: _____	Phone: _____

<b>AGENCY CONTACT:</b> _____	
NAME	TITLE/RANK
Address: _____	City/Zip: _____
Email: _____	Phone: _____

<b>POA/DSA/ASSOC. CONTACT:</b> _____	
NAME	TITLE/RANK
Address: _____	City/Zip: _____
Email: _____	Phone: _____

In order to be considered for inclusion in the annual California Peace Officers' Memorial Ceremony held in Sacramento each May, this form must be submitted by December 31<sup>st</sup> of the previous year.

**This completed and signed form, along with all supporting documentation, should be submitted to:**

[cpomf@camemorial.org](mailto:cpomf@camemorial.org)

**or mailed to:**

**CPOMF  
640 Bercut Drive  
Sacramento, CA 95811**

It should be noted that the death of an officer while "On Duty" does not create a presumption of an "In the Line of Duty" death and each application for enrollment will be evaluated on its circumstances and supporting documentation.

Criteria for including an officer's name on the California Peace Officers' Memorial are separate and distinct from the line-of-duty death criteria used by other entities or programs, including local and national law enforcement memorials and the Public Safety Officers' Benefits (PSOB) Program, U.S. Department of Justice. Approval for inclusion on the California Peace Officers' Memorial in no way impacts decisions made by the federal government regarding the awarding of PSOB benefits.

<b>CPOMF Office Use Only</b>
Date Received: _____
Board Action Date: _____
<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input type="checkbox"/> Pending