APPENDIX B s. 3(2). Return of death for the purposes of section 3 of the Civil Aviation (Births, Deaths and Missing Persons) Ordinance. 1. Registration marking of aircraft_____ 7. Rank or occupation (f)
8. Nationality or country
9. Address or abode (g) 10. Cause of death____ 11. Name of certifying Medical Practitioner (if any)_____ 12. Duration of illness_____ 13. Place of burial_____ 14. Signature, description and address of informant (h)_____ _____ 13. Date of registration_____ 16. Signature and rank of person completing the form_____ _____ Date_____ (a) Day and month in words, year in figures.

(b) Actual position, if known. Otherwise approximate position, e.g. "40 miles west of Kaduna".

(c) Christian names in full, followed by surname. Surname to be written in block letters.

(d) "Male" or "female".

(c) To be recorded in complete years, or in months or days.

(f) Women and children.

In the case of a married woman or a widow, the words "wife of" or "widow of" shall be entered, followed by the name, rank or occupation, and nationality of the husband.

In the case of an unmarried woman, there shall be inserted (i) the word "spinster", followed by her rank or occupation (if any), rank or title (if any), and her nationality, and (ii), the words "daughter of" followed by the name, profession, etc., of her father. NOTES .-"daughter of" followed by the hame, possessing father.

In the case of children under the age of sixteen years the words "son of" or "daughter of" shall be followed by the name, profession, etc., of the father.

(g) The full postal address should be stated.

(h) The informant's full names, relationship (if any) to deceased, and full postal address should be stated.