

**SAM ISAACS & SON LTD. – SUNSET BURIAL PARK & CREMATORIUM**  
**FORM E**  
**CERTIFICATE AFTER POST-MORTEM EXAMINATION**

*(To be given by a Government Medical Officer designated by an Authorized Officer)*

I hereby certify that, acting on the instructions of an authorized Officer of the division, I make a Post Mortem Examination of the remains of:

Name.....

Address.....

Occupation.....

The result of the examination is as follows:

I am satisfied that the cause of death was .....  
..... and that there is no reason for making any  
toxicological analysis\* or for holding an inquest.

Signature.....

Address.....

Medical Officer for the Medical District .....

Registered Qualifications.....

Date.....

**\* The words underlined should be omitted where a toxicological analysis had been made and its result is stated in this Certificate attached to it.**