

Sworn Statement

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Head
Department of Anatomy
Faculty of Medicine
University of Colombo
Kynsey Road, Colombo 08

Dear Sir/ Madam,

Regarding Donation of Cadaver to the Faculty of Medicine

I/We hereby sign and declare my/our willingness without objection, to donate the cadaver of.....(Name of deceased) of N.I.C No..... previously residing at address who expired on (Date), to the Department of Anatomy at the Faculty of Medicine, University of Colombo. Furthermore I/we wish to handover the legal ownership of the above mentioned cadaver to (Name) of NIC No.....

In addition, I/We hereby state that there will be no further inquiry or request regarding the above mentioned cadaver after donation has taken place.

Name	Relationship	N.I.C Number	Signature

I hereby declare that this statement has been read and explained to the above mentioned person/ persons who have in complete understanding affixed their signature(s) in my presence on the date



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(Signature of Justice of Peace & Seal)

