

Countywide Services Agency
Office of the Coroner
Kim Gin, Interm Coroner
Jennifer Becker, Supervising Deputy
Daniel P. Baker, ASO II
Stephany Fiore, M.D., Chief Forensic
Pathologist



Bradley J. Hudson, County Executive

County of Sacramento

RELEASE OF AUTHORIZATION FOR DISPOSITION OF REMAINS/PROPERTY

I DECLARE, UNDER PENALTY OF PERJURY, that I have the right to control the disposition of the remains/property of _____ in accordance with Health and Safety Code Section 7100:

Please check one: REMAINS ONLY PROPERTY ONLY BOTH

NAME: _____ RELATIONSHIP: _____
(Please Print)

ADDRESS: _____ CITY: _____ STATE: _____

ZIP: _____ TELEPHONE: (_____)_____

I hereby release authority to _____ to control the disposition of the above-mentioned remains/property.

ADDRESS: _____ CITY: _____ STATE: _____

ZIP: _____ TELEPHONE: (_____)_____

SIGNATURE: _____ DATE: _____