SOLANO COUNTY SHERIFF-CORONER'S OFFICE RELEASE AUTHORIZATION

JULY 1, 2024 TO JUNE 30, 2025

O: The SHERIFF-CORONER, County of Solano			Coroner Case #	
Decedent Name - First	Middle	_	Last (Family)	
PRINT or TYPE	E the name of the decede	ent as it will appear or	ા the death certificate.	
	NEX	T OF KIN		
director or disposition service. The please release the body to the cu	7100 of the California He herefore, upon completion	ealth & Safety Code, i	it is my legal right to select any funeral n of the death of the named decedent,	
Name of Funeral Home				
Next of Kin SIGNATURE				
PRINT Full Name of Next of Kin				
Relationship to Decedent	_		Telephone: (Include area code)	
Address		City	State/Zip	
Responsible Party (If not next of	kin) SIGNATURE			
PRINT Full Name of Responsible	e Party			
Relationship to Decedent			Telephone (include area code)	
Address		City	State/Zip	
Reason for handling if not next o authority)	of kin: (Must attach a nota	rized or properly witne	essed document that legally transfers	
	CORO	NER'S FEE		
	is to be made upon rele			
and processing. A fee of \$7.00 p Office following completion of the Ordinance 13.4-10, as authorized	oer day for cold storage is e investigation. These fee	s assessed for all day es were adopted by the	ed to recover actual expenses of transport ys the decedent remains at the Coroner's e Solano County Board of Supervisor per 985.	
Next of Kin Initials				
CORONER'S OFFICE ONLY: Total or Partial Fee Exemption	Chata Prisonar/Dianogi		aid/Received by:	
	☐ State Prisoner/Disposit☐ Transported to Corone 's Office Authorization): _			
	PROPER	TY RELEASE		
· · · · · · · · · · · · · · · · · · ·			ral home or Mortuary with the decedent.	
ecedent. Therefore, upon completions:	on of the death investigation	on, please release the o	take custody of the personal property of the decedent's personal property to the custody	
Person/Agency to Obtain Property:	(Must attach a notarized of	or properly witnessed tr	ransfer if not next of kin or funeral home)	
SIGNATURE Relationship to De	ecedent			
Address City State/Zip				