



# OFFICE OF THE CORONER

Coroner: Hayley Thompson, D-ABMDI  
Phone: 360-416-1996 Fax: 360-848-1173  
coroner@co.skagit.wa.us  
1700 Continental Place  
Mount Vernon, WA 98273

Date: \_\_\_\_\_ Case No.: \_\_\_\_\_

To the Coroner of Skagit County;

I, \_\_\_\_\_, am the \_\_\_\_\_ of \_\_\_\_\_.  
(Name) (State relation to deceased) (Deceased Name)

I am requesting a copy of the following report(s):

Investigators Report

Autopsy Report

Toxicology Report

Please forward the above requested report(s) to following company on my behalf.

Name of company: \_\_\_\_\_

Address of company: \_\_\_\_\_

Phone/Fax Number: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Please attach a color copy of a government issued identification.

Signature verified by:

Driver's license  Military ID card  State issued ID card (What State) \_\_\_\_\_

Other: \_\_\_\_\_

Report(s) released by:

\_\_\_\_\_  
Skagit County Coroner Representative

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date