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St. Lawrence County Public Health Department 80 State Highway 310, Suite 2 ■ Canton, New York 13617-1476

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REQUEST FOR RELEASE OF CORONER'S RECORDS

Please fax release form to the St. Lawrence County Public Health Department Fax Number: 315-386-2744

Deceased Individual:			_Case #:
Date of Birth:	Date of De	ath:	
Person Requesting Copy:			
Address to sent report to:			
Phone Number:		Email:	
Relationship to Deceased:			
Signature of Person Requesting Records:		ON FILE	
Name of Coroner Releasing Records:			
Signature of Coroner of Record:			Date: