

**David Villanueva**  
**County Executive**



**Eric Jones**  
**Deputy County Executive**  
**Public Safety and Justice**

**County of Sacramento**

**Rosa A. Vega, Coroner**  
**Department of Coroner**

**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: \_\_\_\_\_

