

OFFICE OF PEORIA COUNTY CORONER

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FREEDOM OF INFORMATION REQUEST

PLEASE FILL OUT THIS FORM AND MAIL/FAX REQUEST TO THE CORONER'S OFFICE.

DATE _____ **TAX ID # 37-6001763**

DECEASED NAME _____ CASE # _____

DATE OF DEATH _____ AUTOPSY _____ INQUEST _____

PERSON REQUESTING INFORMATION/REPORTS _____

NAME _____

ADDRESS _____

CITY, STATE, ZIP _____

FAX _____ PHONE _____

SIGNATURE _____ RELATIONSHIP _____

EACH CASE DIFFERS AND NOT ALL ITEMS ARE AVAILABLE ON EACH CASE.

PLEASE MARK THE ITEMS YOU WISH TO REVIEW IN THE OFFICE - OR COPIES TO PURCHASE.

(IF THE CASE IS COMPLETE. THE ITEMS AVAILABLE WILL BE MARKED)

<u>AVAILABLE</u>	<u>REVIEW / PURCHASE</u>	<u>ITEMS</u>	<u>COST</u>
<u>XX</u>	_____	AUTOPSY REPORT	<u>50</u>
<u>XX</u>	_____	TOXICOLOGY REPORT	<u>25</u>
<u>XX</u>	_____	TRANSCRIPT OF INQUEST	_____ (\$5/PAGE @ _____ PAGES)
<u>XX</u>	_____	VERDICT OF INQUEST	<u>5</u>
<u>XX</u>	_____	CERTIFICATION LETTER	<u>1</u>
AMOUNT OF PAYMENT		<u>\$0</u>	TOTAL CHARGES <u>\$</u>

PREPAYMENT IS REQUIRED

(PLEASE MAKE CHECKS PAYABLE TO OFFICE OF PEORIA COUNTY CORONER)

THE CORONER'S OFFICE WILL RESPOND TO A REQUEST FOR PUBLIC RECORDS WITHIN FIVE (5) WORKING DAYS AFTER RECEIPT OF SUCH REQUEST. IF YOUR REQUEST IS DENIED, YOU MAY FILE AN APPEAL WITH OUR OFFICE.

WHEN THE FILE IS COMPLETED YOUR REQUEST WILL BE PROCESSED AS SOON AS POSSIBLE AND YOU WILL BE CONTACTED WITH THE ITEMS AVAILABLE AND THE COST.

REQUESTED		FOI Form		REC./APP.		ID VERIFIED	
BILLED		PAID	\$0	CHECK #		MAILED	