



**JAMES A. WILKERSON IV, M.D.**  
**CORONER AND CHIEF MEDICAL EXAMINER**



OFFICE OF THE LARIMER COUNTY CORONER/ MEDICAL EXAMINER

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**AUTOPSY REPORT REQUEST FORM**

Autopsies are performed at the discretion of the Larimer County Coroner/ Medical Examiner. Autopsies can take 6 weeks or longer to complete. If you are requesting an autopsy report, please complete the form below and submit to our Office. There is a fee of \$2.00 for each standard report. Please print legibly. You may print and mail, email, or fax the form to our Office, along with the fee. Upon receipt of the Request Form and fees, and completion of the autopsy report requested, we will send the report to you by the method you indicated below.

DECEDENT'S NAME: \_\_\_\_\_

DATE OF DEATH; \_\_\_\_\_

REQUESTOR'S FULL NAME: \_\_\_\_\_

REQUESTOR'S ADDRESS: \_\_\_\_\_

REQUESTOR'S PHONE NUMBER: \_\_\_\_\_

RELATIONSHIP TO THE DECEASED: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

I would like the Autopsy Report to be sent to me via:

- EMAIL      EMAIL ADDRESS: \_\_\_\_\_
- MAIL
- FAX      FAX #: \_\_\_\_\_