



**Jim Whipps, D-ABMDI, CORONER**  
 Darin Kiester, CHIEF DEPUTY CORONER  
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**Request For Records: Family or Legal Representative**

Per W.S. § 7-4-105 (c): I, the undersigned, request the Natrona County Coroner's Office provide a copy of records regarding:

Full Name of the Deceased: \_\_\_\_\_

Date of Death: \_\_\_\_\_

Requesting Party: Name: \_\_\_\_\_

Address: Street: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

(Records will not be emailed)

Contact Phone Number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Purpose for requesting records: \_\_\_\_\_

**Requestor's Relationship to the Deceased:**    \_\_\_ Spouse    \_\_\_ Parent    \_\_\_ Adult Child

\_\_\_ Personal Representative    \_\_\_ Legal Representative (Provide proof)  
 \_\_\_ Legal Guardian (Provide proof)

Siblings are not included per Wyo State Statute § 7-4-105. Do not add any other representatives to the list on the right.

*Note: All family relations **not** specified above as in W.S. §7-4-105(c) are eligible to receive only the Public Records Docket. **Requesting parties are asked to provide a legal, official form of identification to accompany this request such as a photo ID.***

**(Records will not be emailed)**

Records Requested:    \_\_\_ Coroner Docket Report    \_\_\_ Autopsy Report    \_\_\_ Toxicology

**The Natrona County Coroner's office is not custodian to Medical Records.**

*Secondary release of Medical Records is prohibited by Federal Law. Not all listed records are completed in every case. Per W.S. 7-4-105 (m), "A person who knowingly or purposely uses the information in a manner other than the specified purpose for which it was released or violates a court order issued under subsection (g) of this section is guilty of a misdemeanor punishable by imprisonment for not more than six (6) months, a fine of not more than one thousand dollars (\$1,000.00), or both."*

Form of identification provided: \_\_\_\_\_

Coroner/Deputy witnessing requestor's identification: \_\_\_\_\_ Date: \_\_\_\_\_

<p><b>FOR OFFICE USE ONLY</b></p> <p><b>Date Records Sent</b> _____</p>
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