King County Medical Examiner's Office
Harborview Medical Center
325 Ninth Avenue, Box 359792
Seattle, WA 98104-2499
206-731-3232 Fax 206-731-8555
TTY Relay: 711
www.kingcounty.gov/health

Public Health
Seattle & King County

King County Medical Examiner Records Request

DECEDENT INFORMATION

Decedent Name: _____

KCMEO Case #: _____ Date of Death: _____

REQUESTOR INFORMATION

Name: _____ Daytime Phone: _____

Mailing Address: _____
Street Address

_____

_____
City State Zip

I'm including a copy of my:
☐ Photo ID
☐ Court Documentation

Relationship to Decedent: _____

_____
Signature Date

RECORDS REQUESTED

☐ Autopsy and Toxicology Report* *($50.00)*

** Typical turnaround time for reports is 4 to 6 months

☐ Investigators Report *($20.00)*

☐ Photo CD* *($50.00)*

**These images are graphic in nature.

CHOOSE PAYMENT LINK PREFERENCE

☐ E-mail: _____

OR

☐ Cell Phone: _____

CHOOSE ***ONE*** PREFERRED METHOD OF DELIVERY

☐ E-mail: _____

☐ Mailing address, if different from above: _____

_____

E-Mail:
Admin.MEO@kingcounty.gov

Mail: King County Medical Examiner's Office
325 9th Avenue, Box 359792
Seattle, WA 98104