



BODY RELEASE FORM

Medical Examiner's Office

3126 Gun Club Road

West Palm Beach FL 33406-3005

(561) 688-4575

FAX: (561) 688-4588

<http://www.pbcgov.com>

**Palm Beach County
Board of County
Commissioners**

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Steven L. Abrams, Vice-Chairman

Karen T. Marcus

Paulette Burdick

Burt Aaronson

Jess R. Santamaria

Priscilla A. Taylor

County Administrator

Robert Weisman

Date: _____

I hereby authorize the Palm Beach County Medical Examiner's Office to release the body of:

Name of Decedent: _____

To the following Funeral Home:

I am the next of kin legally authorized to make such authorization.

Name: _____

Address: _____

Telephone Number(S) _____

Relationship to Decedent: _____

Signature: _____

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Affirmative Action Employer"*