



# OFFICE OF THE CORONER

Adams & Broomfield Counties

*Monica Broncucia-Jordan*

CHIEF CORONER

## Authorization to Mail Property

I, \_\_\_\_\_, attest that I am the legal next-of-kin of  
\_\_\_\_\_, with all rights and privileges pertaining thereto.

By signing below I authorize the Office of the Coroner, for Adams and Broomfield Counties, to mail the property of the above referenced deceased to:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

By signing below I understand that the Office of the Coroner is not responsible for lost or damaged property and I waive all claims which I may have against the Office of the Coroner for lost or damaged property or other occurrence arising from mailing the property.

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

\_\_\_\_\_  
Print Name

State of \_\_\_\_\_ County of \_\_\_\_\_.

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by  
\_\_\_\_\_ to be his/her free act and deed.

\_\_\_\_\_  
Signature of Notary Public

Name of Notary Public \_\_\_\_\_

Notary Public, State of \_\_\_\_\_

Commission Expires \_\_\_\_\_

SEAL