



Request for Release of Public Records for Non-Commercial Purposes

COPY REQUESTS AND CHARGES

Copies of reports are available by mail to the public following final completion of all the reports prepared on a case. To request copies, complete and return the attached release form. The time frames for the completion of reports may vary depending on the circumstances of each case.

The charges for copies of public records are as follows:

Autopsy report (includes ancillary reports, if applicable):

Family/Personal \$10.00 for first report (additional copies \$35.00) – includes postage

Others \$35.00 per report – includes postage

Ancillary lab test report only:

All \$10.00 per report – includes postage

(Ancillary lab tests, including, but not limited to: Toxicology, Infectious Disease, Cytogenetics/DNA, Forensic Anthropology, Forensic Odontology, Neuropathology, etc.)

Payment in the form of a money order, cashier's check, business check, or personal checks made payable to Pinal County Medical Examiner's Office in the amount totaling the reports requested is required prior to releasing copies of reports.

There is no charge for reports to government agencies affiliated with the case and non-profit community assistance organizations.

MEDICAL EXAMINER REPORT EXPLANATION

The final report issued by the Medical Examiner contains the conclusions as to the cause and manner of death. The autopsy report might include an external examination and the medical description of the condition of internal organs or an external examination only when an accurate finding as to the cause and manner of death may be made by an inspection/external examination of the body and a full autopsy is not necessary.

The final report will not be completed until the results of the toxicology analysis, microscopic slides of the tissue, and other relevant data have been reviewed and evaluated by the medical examiner (if performed).

MAIL REQUESTS TO: PINAL COUNTY MEDICAL EXAMINER
 P.O. BOX 2945
 FLORENCE, AZ 85132



Request for Release of Public Records for Non-Commercial Purposes

Requestor: _____ Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail address: _____

Relationship to decedent: _____ Decedent: _____

Date of Birth: _____ Date of Death: _____

_____ Pinal County Medical Examiner's Case Number

Please check the box next to the type of report requested:

Autopsy report

Ancillary lab report only (list name of report) _____

STATEMENT OF NON-COMMERCIAL PURPOSE

Caution: Arizona Revised Statute 39-121.03 (D) provides:

A person who obtains public records for a commercial purpose without indicating the commercial purpose or who obtains a public record for a non-commercial purpose and uses or knowingly allows the use of such public record for a commercial purpose or who obtains a public record for a commercial purpose and uses or knowingly allows the use of such public record for a different commercial purpose or who obtains a public record from anyone other than the custodian of such records and uses it for a commercial purpose shall in addition to other penalties be liable to the state or the political subdivision from which the public record was obtained for damages in the amount of three times the amount which would have been charged for the public record had the commercial purpose been stated plus costs and reasonable attorney's fees or shall be liable to the state or the political subdivision for the amount of three times the actual damages if it can be shown that the public records would not have been provided had the commercial purpose actual use been stated at the time of obtaining the records ••

I hereby agree that the public records I have requested are not for a "commercial purpose" as defined by A.R.S. § 39-121.03, and will not be resold to any person at a cost based upon the value of the information contained in the public records.

Signature _____ Date _____

Medical Examiner

570 W. Adamsville Road, P.O. Box 2945, Florence, AZ 85132 Phone: 520-866-7260 Fax: 520-866-7296 www.pinalcountyz.gov