

2019-143
RTK REQUEST NUMBER

10. Sept. 19
DATE RECEIVED

17. Sep. 19
5 DAY RESPONSE DATE



COUNTY OF LUZERNE

RIGHT TO KNOW LAW REQUEST FORM

NAME OF REQUESTER: Gabello Karen
(PLEASE PRINT CLEARLY) LAST FIRST MI

MAILING ADDRESS: 72 Glenmaura National Blvd., 2nd Floor
STREET / P.O. BOX

Moosic PA 18507
CITY STATE ZIP CODE

PHONE # 570-496-1336 FAX# 1-866-263-2860

EMAIL ADDRESS: gabellokl@ccbh.com

SIGNATURE: _____ DATE: _____

RECORDS REQUESTED - Requesters MUST specify the document(s) sought. Please use additional pages if necessary.
Coroners reports for the following individuals:

Joseph Vinciguerra	DOB: 8/4/1958	Estimated DOD: 7/1/2019
Mark Williams	DOB: 3/28/1963	Estimated DOD: 7/15/2019
Jeremy Soto	DOB: 10/13/1993	Estimated DOD: 6/14/2019
Edward Oliver	DOB: 3/30/1965	Estimated DOD: 8/20/19

PLEASE CHECK ONE OF THE FOLLOWING:

- I AM ONLY REQUESTING ACCESS TO THE DOCUMENT(S)
- I AM REQUESTING A HARD COPY OF THE DOCUMENT(S) (PAPER, CD, etc...)
- I AM REQUESTING AN E-FILE OF THE DOCUMENT(S) (IF AVAILABLE) (PDF, EXCEL SPRDSHT, etc...)

PLEASE NOTE: LUZERNE COUNTY IS NOT REQUIRED TO CREATE A RECORD WHICH DOES NOT CURRENTLY EXIST OR TO COMPILE, MAINTAIN, FORMAT OR ORGANIZE A RECORD IN A MANNER IN WHICH THE AGENCY DOES NOT CURRENTLY COMPILE, MAINTAIN, FORMAT OR ORGANIZE THE RECORD



Fax

To: Laura Dennis
Fax: 915702995608
Date: September 10, 2019
Pages: 3
Subject: Right to Know

From: Gabello, Karen L
Fax:

Comments:

Attached are Coroner's Reports Request in regards to Right to Know

Thank you

Karen Gabello
Community Care

This fax was sent electronically from the UPMC Health System. This facsimile contains privileged and confidential information intended for the use of the recipient named above. If you are not the recipient of this facsimile, or the employee or agent responsible for delivering it to the intended recipient, you are hereby notified that any dissemination or copying of this facsimile is strictly prohibited. If you have received this facsimile in error, please notify the sender above immediately and return the original to the above address via U.S. mail.



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www.ccbh.com

September 10, 2019

Right to Know Act
ATTN: Ms. Laura Dennis
Luzerne County Court House
Penn Place
20 North Pennsylvania Avenue
Wilkes Barre, Pa. 18711

Ms. Dennis:

As the behavioral health insurer for HealthChoices members in your county, Community Care Behavioral Health Organization, respectfully requests a copy of the coroners reports for our members. Information on the course of death is essential to allow us to properly process these cases for closure. Thank you for your assistance.

Karen Gabello, MS
Quality Management Clinician
Community Care Behavioral Health Organization



OFFICE OF THE CORONER

An investigation conducted by the Luzerne County Coroner's Office into the death of
Mark Williams determined the death to be as follows:

Date of Death: 7-18-19

Cause of Death: Presumed Natural Causes

Manner of Death: Natural

Deputy Coroner: _____



OFFICE OF THE CORONER

An investigation conducted by the Luzerne County Coroner's Office into the death of
Joseph Vencigione determined the death to be as follows:

Date of Death: 7-1-19

Cause of Death: Natural Causes

Manner of Death: Natural

Deputy Coroner: _____



OFFICE OF THE CORONER

An investigation conducted by the Luzerne County Coroner's Office into the death of
Jeremy Soto determined the death to be as follows:

Date of Death: 6-9-17

Cause of Death: Trauma

Manner of Death: Homicide

Deputy Coroner: _____



OFFICE OF THE CORONER

An investigation conducted by the Luzerne County Coroner's Office into the death of
Edward Clavel determined the death to be as follows:

Date of Death: 3-20-19

Cause of Death: Resumed natural Causes

Manner of Death: Natural

Deputy Coroner: _____