

Documentation of Service of the Health Officer Order No. C19-06-I

On _____ (date) I served _____
(full name of individual being served)

a copy of this order by (check one):

In person.

Electronic mail at _____ (email address)

First class mail at _____

(address)

Phone at _____ (phone number)

and I spoke with an individual who affirmatively identified themselves as the individual named in this Order.

I then personally informed the individual that they are required to isolate as set forth in the **Health Officer Order No. C19-06-I**, a copy of which is available at the SoCoEmergency.org website.

The individual is ordered to isolate at:

(place of isolation/address)

Date _____ Name _____
(Full name of person delivering order)

When complete, either attach this form to an email and send to phnurse@sonoma-county.org, or fax the completed form to **(707) 565-4565**.