

# MEMO

To: Carroll County Board Of Supervisors  
From: R. Cellell Dalton  
Date: 12-6-2019  
Subject: Unclaimed Body

Please find attached the Court Order concerning an unclaimed body. The Board of Supervisors is required to appropriate \$1735.00 to High Country Services Funeral and Cremation for the unclaimed body. Sheriff Gardner has served paperwork to BB&T Bank to seize assets that can be used to reimburse the County. I request that the Carroll County Board of Supervisors request the County Attorney to develop a policy on how to deal with these type of occurrences.



RICHMOND | CHRISTIANBURG | FREDERICKSBURG  
MCLEAN | DURHAM | WILLIAMSBURG  
SANDS ANDERSON PC

WWW.SANDSANDERSON.COM

US Mail: P.O. Box 2009  
Christiansburg, Virginia 24068-2009

Delivery: 150 Peppers Ferry Rd NE  
Christiansburg, Virginia 24073-6548

Mary Foll Russell  
Attorney  
Direct: (540) 260-3030  
Fax: (540) 260-0022  
MRussell@SandsAnderson.com

October 2, 2019

**VIA HAND DELIVERY**

Gerald R. Goad, Clerk  
Circuit Court of Carroll County  
P. O. Box 218  
Hillsville, VA 24343

**RE: *Richard Michael Metcalf***

Dear Gerald:

Please find enclosed a Petition for filing in the above-styled matter.

As the Petitioner is a governmental agency receiving funds both directly from the Commonwealth and the locality which it serves, it is our understanding that fees and costs are waived pursuant to Code Section 17.1-266.

If you have any questions, please do not hesitate to contact me.

With kind regards I am,

Very truly yours,

Mary F. Russell, Esq.

MRB/gdc  
Enclosure

cc: Sheriff, John B. Gardner (w/enc.) (via hand-delivery)

**VIRGINIA: IN THE CIRCUIT COURT OF CARROLL COUNTY, VIRGINIA**

**IN RE: Richard Michael Metcalf**

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**Case No.** VALIDATE CASE PAPERS  
RCPT : 19000010020  
DATE : 10/02/2019 TIME: 11:31  
CASE : 035CL19000209-00  
ACCT : METCALF, RICHARD MICHAEL  
AMT. : \$0.00

**PETITION**

**COMES NOW** the County of Carroll, by counsel, pursuant to Virginia Code § 32.1-309.2 and states to the Court as follows;

- 1) That Richard Michael Metcalf (the "Decedent") was born October 28, 1943.
- 2) The Decedent was a resident of 1747 Chantilly Drive, Fancy Gap, Virginia, in the County of Carroll, Virginia.
- 3) The Decedent died on or about August 23, 2019, at Twin County Regional Hospital, Galax, Virginia.
- 4) The Decedent's remains are unclaimed and are located in High Country Services Funerals and Cremation, Galax, Virginia.
- 5) High Country Services Funerals and Cremation has located and notified the next of kin.
- 6) High Country Services Funerals and Cremation, was able to locate a brother of Decedent, Corwin Metcalf of Little River, S.C., and notified this individual of the death and his right to claim the body and make arrangement for the remains. Corwin Metcalf declined to claim the body of Decedent. The step-son of Richard Metcalf was also contacted by High Country Services Funerals and Cremation but

On information and belief, Decedent held approximately \$1,500.00 in an account at BB&T in Hillsville, VA.

11) Virginia Code § 32.1-309.2 (E) provides that: "In cases in which a decedent whose remains are disposed of in accordance with this section has an estate out of which disposition expenses may be paid, in whole or in part, such assets shall be seized for such purpose."

12) Pursuant to § 32.1-309.2 (E), Petitioner requests that the Sheriff's Department of the County of Carroll, Virginia, be authorized to seize the assets of the Decedent with as much of the assets of Decedent as necessary to be used to reimburse the County for disposition expenses and the remainder of any cash to be paid to the Executor or Administrator of the estate of Richard Metcalf or paid into registry of the Court.

13) In the event that any surplus assets of the Decedent exist after reimbursement of expenses above, the Sheriff's Department of Carroll County may request from the Court such attorney fees and costs as are necessary and reasonable.

**WHEREFORE**, the County of Carroll, Virginia hereby requests that this Court enter an Order allowing the cremation of Decedent; authorizing the County of Carroll, Virginia to bear the costs of Seventeen Thirty Five Dollars (\$1735.00); authorizing the Sheriff's Department of the County of Carroll, Virginia, to seize the assets of the Decedent, including any funds on deposit at BB&T in Hillsville, VA, and use same as needed for reimbursement to the City of disposition expenses, with the balance of funds, if any, to be paid to the Executor or Administrator of the estate of Richard Metcalf or into the registry of the Court.

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has not claimed the body. No other living relatives of Decedent are known and more than 10 days has passed since the afore-mentioned relatives were notified.

- 7) Virginia Code § 32.1-309.2 provides that if the next of kin of the Decedent or other person authorized by law fails or refuses to claim the body within 10 days:

the primary law-enforcement agency shall ... without delay request an order authorizing the person or institution having initial custody of the dead body to transfer custody of the body to a funeral service establishment for final disposition. Upon entry of a final order for disposition of the dead body, the person or institution having initial custody of the body shall transfer custody of the body to a funeral service establishment, which shall take possession of the dead body for disposition in accordance with the provisions of such order. Except as provided in subsection B or C, the reasonable expenses of disposition of the body shall be borne (1) by the county or city in which the decedent resided at the time of death if the decedent was a resident of Virginia or (2) by the county or city where death occurred if the decedent was not a resident of Virginia or the location of the decedent's residence cannot reasonably be determined. However, no such expenses shall be paid by such county or city until allowed by an appropriate court in such county or city.

§ 32.1-309.2(A) of the Code of Virginia.

- 8) The body has been transported to High Country Services Funerals and Cremation from the hospital. The County has been advised that High Country Services Funerals and Cremation will charge \$1735.00 for cremation of the body. The written cost estimate of High Country Services Funerals and Cremation is attached as Ex "A".
- 9) The office of the Chief Medical Examiner has certified that no further examination of the body is necessary and permission to cremate is granted. A copy of said certificate is attached hereto as Ex "B".
- 10) The Decedent is reported to have an estate from which these expenses can be paid.

# High Country Services Funeral & Cremations

600 Glendale Road  
Galax, VA 24333  
(276) 236-9009  
(276) 236-0219/FAX

940627-204



No. 2019-084HC

DECEASED Richard Michael Melcarf  
DATE OF DEATH August 23, 2019  
PLACE OF DEATH Galax, VA  
DATE OF STATEMENT August 24, 2019

## ITEMIZED STATEMENT OF FUNERAL GOODS AND SERVICES SELECTED

<b>I. Professional Services:</b>	
Basic services of Funeral Director and Staff.....	\$ N/A
<b>II. Funeral Home Facilities:</b>	
A. Facilities and Staff for viewing/visitation.....	\$ N/A
B. Facilities and Staff for funeral ceremony (chapel or rooms).....	\$ N/A
C. Facilities and Staff for Memorial Services.....	\$ N/A
D. Staff and Equipment for graveside services.....	\$ N/A
E. Staff and Equipment for church services.....	\$ N/A
F. Other Use of Facilities.....	\$ 75.00
Total for use of Funeral Home Facilities	\$ 75.00

**III. Embalming:**  
If you selected a funeral that may require embalming, such as a funeral with viewing, you may have to pay for embalming. You do not have to pay for embalming you did not approve if you selected arrangements such as a direct cremation or immediate burial. If we charged for embalming, we will explain why below.

- A. Normal remains..... \$ N/A
- B. Embalming Authorized By: \_\_\_\_\_
- C. Reason for Embalming: \_\_\_\_\_

<b>IV. Other Preparation of the Body</b>	
A. Dressing.....	\$ N/A
B. Make-up.....	\$ N/A
C. Cosmetics.....	\$ N/A
D. Washing and distribution when no embalming..	\$ N/A
E. Hair Style.....	\$ N/A
F. Restoration.....	\$ N/A
G. Other Services.....	\$ N/A
Total of Other Preparation of the Body	\$ N/A

**V. Immediate Burial.....** \$ N/A  
*See General Price List for complete description.*

**VI. Direct Cremation.....** \$ 1,880.00  
*See General Price List for complete description.*

**VII. Transfer of Remains to Funeral Establishment.....** \$ N/A  
*See General Price List for complete description.*

**VIII. Forwarding of Remains to Another Funeral Home.....** \$ N/A  
*See General Price List for complete description.*

**IX. Receiving Remains from Another Funeral Home.....** \$ N/A  
*See General Price List for complete description.*

<b>X. Automotive Equipment</b>	
A. Family Car.....	\$ N/A
B. Hearse.....	\$ N/A
C. Vehicle for Flowers.....	\$ N/A
D. Lead Car.....	\$ N/A
E. Passenger Car.....	\$ N/A
F. Pullbearer Car.....	\$ N/A
G. Alternate Vehicle.....	\$ N/A
Total for Automotive Equipment	\$ N/A

<b>XI. Funeral Merchandise</b>	
A. Casket.....	\$ N/A
Name/No. _____	
Material _____	
Color _____	
B. Outer Burial Container.....	\$ N/A
Name/No. _____	
Material _____	
Color _____	
C. Cremation Urn.....	\$ N/A
D. Alternative Container (use for Cremation).....	\$ 60.00
E. Clothing.....	\$ N/A
F. Register Book.....	\$ N/A
G. Memorial Cards City:.....	\$ N/A
H. Acknowledgment Cards City:.....	\$ N/A
I. Prayer Cards City:.....	\$ N/A
J. Cross / Crucifix.....	\$ N/A
K. Flowers.....	\$ N/A
L. Additional Merchandise.....	\$ N/A
Total Funeral Home Charges	\$ 60.00

### XII. Cash Advances

A. 5 Certified Death Certificates @ \$12.00ea.....	\$ 72.00
B. High Country Services Funeral & Cremations..	\$ N/A
C. Medical Examiner.....	\$ 50.00
D. Obituary.....	\$ N/A
E. Open/Close.....	\$ N/A
F. Tent/Chairs.....	\$ N/A
G. Flowers.....	\$ N/A
H. Honorarium.....	\$ N/A
I. Hair/Cosmo.....	\$ N/A
J. Memorial Stone.....	\$ N/A
K. ....	\$ N/A
L. ....	\$ N/A
Total of Cash Advances	\$ 122.00

### XIII. Summary

Total Funeral Home Charges.....	\$ 1,735.00
Sales Tax (if applicable).....	\$ 3.19
Total Cash Advances.....	\$ 122.00
Grand Total.....	\$ 1,860.19
Less credits and prepayments	1,880.18
.....	\$
.....	\$
.....	\$
Total Credits.....	\$ N/A
Balance Due.....	\$ 1,860.18

### DISCLOSURES

The charges shown are for those items that you selected or that are required. If we are required by law or by a cemetery or crematory to use any items, we will explain the reason in writing below.

#### Alternative Container Required For Cremation

Warranty: The only warranty on the casket or outer burial container, or both, sold in connection with this service is the express written warranty if any, granted by the manufacturer. This Funeral Home makes no warranty, express or implied, with respect to the casket or outer burial container.

### ACKNOWLEDGMENT AND AGREEMENT

I hereby acknowledge that I have the legal right to arrange the final services for the deceased and I authorize this funeral establishment to perform services, furnish goods and incur outside charges specified on this Statement. I acknowledge that I have RECEIVED the General Price List and have been offered for review the Casket Price List and Outer Burial Container Price List.

### TERMS AND PAYMENTS

Terms of Payment: \_\_\_\_\_

Full payment is due no later than: 9/22/19  
If any payment is not paid when due, an unanticipated LATE CHARGE of 1.50% per month (ANNUAL PERCENTAGE RATE 18.00%) on the unpaid balance will be due. I agree to pay the balance Due listed on this Statement plus any Late Charge. In the event I default in payment to this funeral establishment, I agree to pay reasonable attorney's fees and court costs in addition to any Late Charge applicable. I understand and agree that I am assuming personal liability for the charges set forth in this Statement and that this is in addition to the liability imposed by law upon the estate of the above and acknowledge receipt of a copy of this Statement.

Signed \_\_\_\_\_ Date \_\_\_\_\_  
536 Alderly Court Little River SC 29586  
Street City State Zip

Co-Signed \_\_\_\_\_ Date \_\_\_\_\_  
Street City State Zip  
High Country Services Funeral & Cremations agrees to provide services, merchandise and cash advances indicated on this Statement.

Roger Blevins  
Funeral Director or Funeral Service Licensee





# COMMONWEALTH of VIRGINIA

Department of Health  
Office of the Chief Medical Examiner

CENTRAL DISTRICT:  
400 East Jackson St.  
Richmond, Virginia 23219-3694  
(804) 786-3174  
800-447-1706  
FAX (804) 371-8595

WESTERN DISTRICT:  
6600 Northside High School Road  
Roanoke, Virginia 24019  
(540) 581-6615  
800-882-8312  
FAX (540) 561-6619

TIDEWATER DISTRICT:  
830 Southampton Ave., Suite 100  
Norfolk, Virginia 23510  
(757) 683-6366  
800-395-7030  
FAX (757) 683-2589

NORTHERN VA DISTRICT:  
10850 Pyramid Place Suite 121  
Manassas, Virginia 20110  
(703) 530-2600  
(703) 530-0510

## CREMATION OR BURIAL AT SEA CERTIFICATE

I hereby certify that on 8/29/19 I viewed the body of Richard Michael Metcalf  
Date

75 CAUCASIAN M who died on 8-23-19 at Twin County Reg. 200 Hosp. Dr.  
Age Race Sex Date Street and No. or Rural Route

Galax and made personal inquiry into the cause and manner of death of said  
City or Town County

decedent. Upon such view and inquiry it is my opinion that no further examination or judicial inquiry concerning the death is necessary.

Medical Examiner's Case: Yes  No

Cause of Death: Acute Respiratory Failure, Pneumonia

Manner of Death: Natural

Permission is herewith given to High Country Services 600 Glendale Rd.  
Name of Person Applying for Certificate

Galax, VA 24333 to:  cremate  
 bury at sea

Pink Copy

Signature of Medical Examiner

332 Coon Ridge Rd  
Street and Number or Rural Route

Hillsville  
City or Town

Carroll  
City or County of Medical Examiner's Jurisdiction

8/29/19  
Date Signed

NOTE: Person applying for this certificate shall deliver to the signing Medical Examiner the fee established pursuant to §32.1-284, Code of Virginia.

Deliver the original certificate (white) to the person applying for it along with the (canary) copy for the crematory, retaining one (gold) copy for your own use and sending the other (pink) to the District Office.

White - Funeral Home  
Canary - Crematory  
Pink - District Office  
Gold - Medical Examiner



# High Country Services Funeral & Cremations

600 Glendale Road  
Galax, VA 24333  
(276) 236-9009  
(276) 236-0219/FAX

940627-204

## XII. Cash Advances

A. Certified Death Certificates @ \$ 12 each	\$ 72.00
B. High Country Services	\$
C. Medical Examiner	\$ 50.00
D. Obituary	\$
E. Open/Close	\$
F. Tent/Chairs	\$
G. Flowers	\$
H. Honorarium	\$
I. Hefz/Coemo	\$
J. Memorial Stone	\$
K.	\$
L.	\$
<b>Total of Cash Advances</b>	\$

No. \_\_\_\_\_  
DECEASED Richard Michael Metcalf  
DATE OF DEATH \_\_\_\_\_  
PLACE OF DEATH \_\_\_\_\_  
DATE OF STATEMENT 08/21/2019

## ITEMIZED STATEMENT OF FUNERAL GOODS AND SERVICES SELECTED

<b>I. Professional Services:</b>	
Basic services of Funeral Director and Staff	\$
<b>II. Funeral Home Facilities:</b>	
A. Facilities and Staff for viewing/visitation	\$
B. Facilities and Staff for funeral ceremony (chapel or rooms)	\$
C. Facilities and Staff for Memorial Services	\$
D. Staff and Equipment for graveside services	\$
E. Staff and Equipment for church services	\$
F. Other Use of Facilities	\$
<b>Total for use of Funeral Home Facilities</b>	\$

III. Embalming:  
If you selected a funeral that may require embalming, such as a funeral with viewing, you may have to pay for embalming. You do not have to pay for embalming you did not approve if you selected arrangements such as a direct cremation or immediate burial. If we charged for embalming, we will explain why below.

- A. Normal remains \$ \_\_\_\_\_  
B. Embalming Authorized By: \_\_\_\_\_  
C. Reason for Embalming: \_\_\_\_\_

<b>IV. Other Preparation of the Body</b>	
A. Dressing	\$
B. Make-up	\$
C. Casketing	\$
D. Washing and disinfection when no embalming	\$
E. Hair Style	\$
F. Restoration	\$
G. Other Services	\$
<b>Total of Other Preparation of the Body</b>	\$

V. Immediate Burial \$ \_\_\_\_\_  
See General Price List for complete description.

VI. Direct Cremation \$ 1000.00  
See General Price List for complete description.

VII. Transfer of Remains to Funeral Establishment \$ \_\_\_\_\_  
See General Price List for complete description.

VIII. Forwarding of Remains to Another Funeral Home \$ \_\_\_\_\_  
See General Price List for complete description.

IX. Receiving Remains from Another Funeral Home \$ \_\_\_\_\_  
See General Price List for complete description.

<b>X. Automotive Equipment</b>	
A. Family Car	\$
B. Hearse	\$
C. Vehicle for Flowers	\$
D. Load Car	\$
E. Passenger Car	\$
F. Pullbeater Car	\$
G. Alternate Vehicle	\$
<b>Total for Automotive Equipment</b>	\$

<b>XI. Funeral Merchandise</b>	
A. Casket	\$
Name/No. _____	
Material _____	
Color _____	
B. Outer Burial Container	\$
Name/No. _____	
Material _____	
Color _____	
C. Cremation Urn	\$
D. Alternative Container (use for Cremation)	\$ <u>80.00</u>
E. Clothing	\$
F. Register Book	\$
G. Memorial Cards Qty: _____	\$
H. Acknowledgement Cards Qty: _____	\$
I. Prayer Cards Qty: _____	\$
J. Cross / Crucifix	\$
K. Flowers	\$
L. Additional Merchandise	\$
<b>Total Funeral Home Charges</b>	\$

## XIII. Summary

Total Funeral Home Charges	\$
Sales Tax (if applicable)	\$ <u>3.18</u>
<b>Total Cash Advances</b>	\$
<b>Grand Total</b>	\$
Less credits and prepayments	\$
	\$
	\$
<b>Total Credits</b>	\$
<b>Balance Due</b>	\$ <u>1795.18</u>

## DISCLOSURES

The charges shown are for those items that you selected or that are required. If we are required by law or by a censatory or crematory to use any items, we will explain the reason in writing below.

## Alternative Container Required for Cremation

Warranty: The only warranty on the casket or outer burial container, or both, sold in connection with this service is the express written warranty if any, granted by the manufacturer. This Funeral Home makes no warranty, express or implied, with respect to the casket or outer burial container.

## ACKNOWLEDGMENT AND AGREEMENT

I hereby acknowledge that I have the legal right to arrange the final services for the deceased and I authorize this funeral establishment to perform services, furnish goods and incur outside charges specified on this Statement. I acknowledge that I have RECEIVED the General Price List and have been offered to review the Casket Price List and Outer Burial Container Price List.

## TERMS AND PAYMENTS

Terms of Payment: \_\_\_\_\_

Full payment is due no later than: \_\_\_\_\_  
If any payment is not paid when due, an unanticipated LATE CHARGE of 1.50% per month (ANNUAL PERCENTAGE RATE 18.00%) on the unpaid balance will be due. I agree to pay the balance Due listed on this Statement plus any Late Charge. In the event I default in payment to this funeral establishment, I agree to pay reasonable attorney's fees and court costs in addition to any Late Charge applicable. I understand and agree that I am assuming personal liability for the charges set forth in this Statement and that this is in addition to the liability imposed by law upon the estate of the above and acknowledge receipt of a copy of this Statement.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Co-Signed \_\_\_\_\_ Date \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

High Country Services Funeral & Cremations agrees to provide services, merchandise and cash advances indicated on this Statement.

Roger Stevens  
Funeral Director or Funeral Service Licensee