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INDIANA STATE BOARD OF HEALTH DIVISION OF VITAL RECORDS MEDICAL CERTIFICATE OF DEATH

2833

Hammond

Hammond Ind

State No.

Local No. 70-0056 15982

PERMANENT INK SEE HANDBOOK FOR INSTRUCTIONS

DECEASED NAME: HAROLD L NEWLUN, SEX: MALE, DATE OF DEATH: JAN 12 1970, RACE: WHITE, AGE: 52, COUNTY OF DEATH: LAKE, HOSPITAL: ST. MARY MERCY HOSPITAL, SURVIVING SPOUSE: CECELIA MAGER, SOCIAL SECURITY NUMBER: 334-03-8365, RESIDENCE: IND, COUNTY: LAKE, CITY: HAMMOND, TOWNSHIP: NORTH, STREET: 2833 KENWOOD AVE.

PARENTS: FATHER: JOSEPH NEWLUN, MOTHER: DELLIE WILLIAMSON, INFORMANT: CECELIA NEWLUN, RELATIONSHIP: WIFE, MAILING ADDRESS: 2833 KENWOOD AVE HAMMOND IND

PART I. DEATH WAS CAUSED BY: MYOCARDIAL INFARCTION, CORONARY THROMBOSIS, ARTERIO SCLEROTIC HEART DISEASE, DIABETES MELLITUS. APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH: 1 week.

DEATH OCCURRED: JAN 12 1970, 11:30 AM, CERTIFIER: JOHN P. BIRZELL, M.D., SIGNATURE: John P. Birzell M.D., ADDRESS: 124 N. Main Street Crown Point, Ind.

BURIAL: BURIAL: BURIAL, CEMETERY: CALUMET PK CEMETERY, LOCATION: Crown Point IND, FUNERAL HOME: FAGEN FUNERAL GARDENS INC, ADDRESS: 2828 Highway Ave Hickland Ind, DATE RECEIVED: JAN 14 1970.

FILED JAN 1 1970

ANDREW J. MICHENKO RECORDER



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HEALTH COMMISSIONER  
CITY OF GARY, IND.  
DATE... JAN 14 1988...