

68579

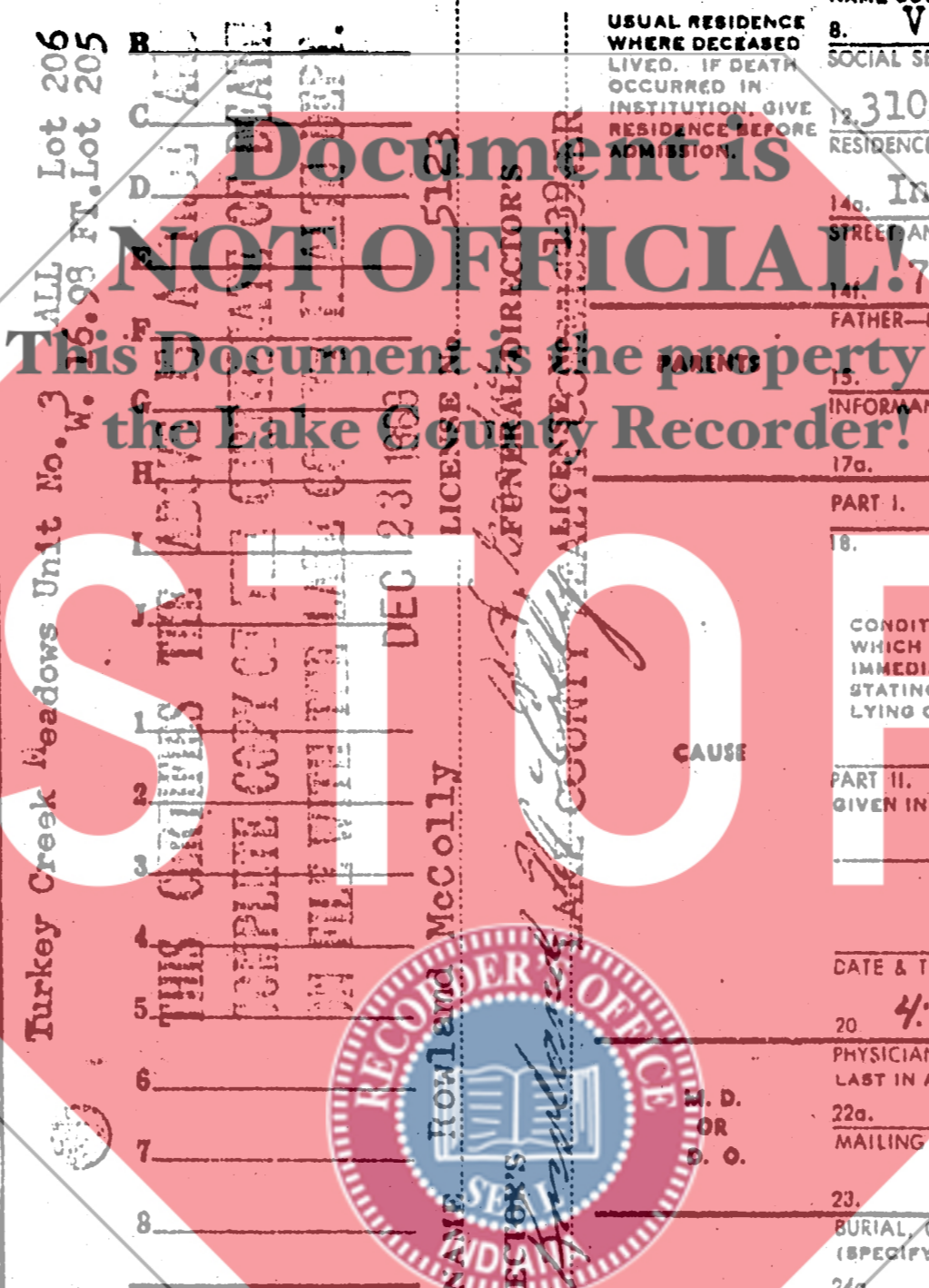
TYPE OR PRINT
PLAINLY WITH
UNFADING INK
THIS IS A
PERMANENT
RECORD

Below for State Office Use

Turkey Creek Meadows Unit No. 3
ALL Lot 206
W. 6,98 FT. Lot 205

Disposition Permit Issued
Provisional Certificate
 Yes No

FUNERAL HOME No. 244
EMBALMER'S NAME: HOMER MCCOLLY
FUNERAL DIRECTOR'S SIGNATURE: [Signature]



INDIANA STATE BOARD OF HEALTH
MEDICAL CERTIFICATE OF DEATH
Herbert J. Morris, Atty.
State 11 W. 7th Ave.
No. Gary, Ind. 46402

Local No. 667-69 68579

PERMANENT INK SEE HANDBOOK FOR INSTRUCTIONS

DECEASED—NAME: MICHAEL PRIMICH, SEX: male, DATE OF DEATH: Dec. 19, 1969

RACE: white, AGE—LAST BIRTHDAY (YEARS): 56, UNDER 1 YEAR: 0, UNDER 1 DAY: 0, DATE OF BIRTH: April 1, 1913, COUNTY OF DEATH: Lake

CITY, TOWN, OR LOCATION OF DEATH: Merrillville, INSIDE CITY LIMITS: NO, HOSPITAL OR OTHER INSTITUTION—NAME: 736 W. 66th Place

DECEASED: 7b. Merrillville, STATE OF BIRTH: Virginia, CITIZEN OF WHAT COUNTRY: USA, MARRIED: X, NEVER MARRIED: , SURVIVING SPOUSE: Margaret Duve

USUAL RESIDENCE WHERE DECEASED LIVED: 8. Virginia, SOCIAL SECURITY NUMBER: 310 22 0011, USUAL OCCUPATION: 13a. Sales, KIND OF BUSINESS OR INDUSTRY: 13b. Gary Steel Products

RESIDENCE—STATE: Indiana, COUNTY: Lake, CITY, TOWN OR LOCATION: Merrillville, INSIDE CITY LIMITS: NO, TOWNSHIP: Ross

14a. 736 W. 66th Place, 14g. WAS DECEASED EVER IN U.S. ARMED FORCES? NO, 14h. IS RESIDENCE ON A FARM? NO

FATHER—NAME: John Primich, MOTHER—MAIDEN NAME: Mary Zudeck

INFORMANT—NAME: Mrs. Margaret Primich, RELATIONSHIP: Wife, MAILING ADDRESS: 736 W. 66th Place, Merrillville

PART I. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c))

8. IMMEDIATE CAUSE: (a) Metastatic Carcinoma, (b) Carcinoma of Colon, (c) 640.

CONDITIONS, IF ANY, WHICH GAVE RISE TO IMMEDIATE CAUSE (A), STATING THE UNDERLYING CAUSE LAST

PART II. OTHER SIGNIFICANT CONDITIONS: CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (A)

CAUPTOPSY: YES NO IF YES WERE FINDINGS CONSIDERED IN DETERMINING CAUSE OF DEATH: YES NO

DATE & TIME OF DEATH: 4:45 AM December 19, 1969, DATE SIGNED: Dec 20 1969

PHYSICIAN'S NAME (TYPE OR PRINT): Raymond J. Doherty, SIGNATURE OF PHYSICIAN: [Signature]

MAILING ADDRESS—PHYSICIAN: 47 W. 68th Ave Merrillville, Indiana

BURIAL, CREMATION, REMOVAL (SPECIFY): Burial, CEMETERY, CREMATORY, FUNERAL HOME: Calumet Park, LOCATION: Merrillville, Indiana

DATE (MONTH, DAY, YEAR): Dec. 22, 1969, FUNERAL HOME—NAME AND ADDRESS: Linton & McCosly, Inc., 1286 Broadway, Gary, Indiana

HEALTH OFFICER'S SIGNATURE: [Signature], DATE RECEIVED BY LOCAL HEALTH OFFICER: December 22, 1969