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Below the State Code Number

FUNERAL HOME

INDIANA STATE BOARD OF HEALTH
MEDICAL CERTIFICATE OF DEATH

Local No. 472-80

State No. 926

DECEDENT — NAME: First Dorothy; Middle T.; Last Jebens

SEX: , Female

DATE OF DEATH: , March 31, 1980

RACE: White

AGE: 80

UNDER 1 YEAR: Mos. Days

UNDER 1 DAY: Hours Min.

DATE OF BIRTH: 5-2-1899

COUNTY OF DEATH: Lake

CITY, TOWN OR LOCATION OF DEATH: Crown Point

HOSPITAL OR OTHER INSTITUTION: Lake County Convalescent Home

If Hosp. or Inst., Inpatient or Resident?: Inpatient

STATE OF BIRTH: Germany

CITIZEN OF WHAT COUNTRY: U.S.A.

MARRIED, NEVER MARRIED, WIDOWED, DIVORCED: Widowed

SURVIVING SPOUSE:

DID DECEDENT EVER SERVE IN U.S. ARMED FORCES?: No

SOCIAL SECURITY NUMBER: 321-30-4388D

USUAL OCCUPATION: Housewife

KIND OF BUSINESS OR INDUSTRY: Own Home

RESIDENCE — STATE: Indiana

COUNTY: Lake

CITY, TOWN OR LOCATION: Crown Point

RESIDENCE ON A FARM?: YES ☐ NO ☐

INSIDE CITY LIMITS?: Yes

STREET AND NUMBER: 612 West Joliet

SPANISH/HISPANIC ORIGIN?: YES ☐ NO ☐ If YES specify Mexican, Cuban, Puerto Rican, etc.

FATHER'S NAME: First Theodor; Last Rorden

MOTHER'S MAIDEN NAME: First Betty; Last Backer

INFORMANT: Henry Jebens Jr.

MAILING ADDRESS: 13416 Delaware, Crown Point, Indiana 46307

DISPOSITION: Burial

CEMETERY OR CREMATORY — FUNERAL HOME: Calumet Park Cemetery

LOCATION: Merrillville, In.

DATE: April 3, 1980

FUNERAL HOME — NAME AND ADDRESS: Little Funeral Home 811 E. Francis, Crown Point,

DATE SIGNED: April 1, 1980

HOUR OF DEATH: 5:41 P.M.

BY: J. C. Espino M. D.

MAILING ADDRESS: 290th & 93rd Avenue, Crown Point, Indiana 46307

DATE RECEIVED BY LOCAL HEALTH OFFICER: 11-3-80

CAUSE

PART I

a. Status Post Left Radical Mastectomy (1971)

b. with Metastases to Left axilla and Multiple

c. Metastases to bones (right acetabulum, left

d. Ilium & Left Ischium, Left Pubic Ramus

PART II

Other Significant Conditions Contributing to Death but not Related to Cause Given in Part I

Autopsy?: No.

Disposition Permit Issued: Provisional Certificate? Yes ☐ No ☐

EMBALMER'S NAME

FUNERAL DIRECTOR'S SIGNATURE

DEATH CERTIFICATE REV. 10/77

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