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RECORD

Below for State Office Use

583234

FUNERAL HOME
No. 780

FUNERAL DIRECTOR'S
LICENSE No. 2121

LAKE COUNTY HEALTH COMMISSIONER

EMBALMER'S NAME: Anthony S. ...
FUNERAL DIRECTOR'S SIGNATURE: Anthony S. ...

Disposition Permit
issued
Provisional
Certificate
 Yes No

INDIANA STATE BOARD OF HEALTH
MEDICAL CERTIFICATE OF DEATH

State No.

Local No. 640-500

DECEASED - NAME: Mary MAIDEN NAME: Cainrath LAST NAME: Cainrath SEX: Female DATE OF DEATH: April 25, 1980

AGE: 73 UNDER 1 YEAR: NONE UNDER 1 DAY: NONE DATE OF BIRTH: Dec. 8, 1906 COUNTY OF DEATH: Lake

ETHNIC OR RACE: GEN

CITY, TOWN OR LOCATION OF DEATH: Hobart HOSPITAL OR OTHER INSTITUTION: Hobart Mercy Hospital INPATIENT OR NOT: Inpatient

STATE OF BIRTH: Pennsylvania ORDER OF WHAT COUNTRY: U.S.A. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED: Married SURVIVING SPOUSE: Leo Cainrath

SOCIAL SECURITY NUMBER: 311-50-9893 USUAL OCCUPATION: Housewife

RESIDENCE - STATE: Ind. COUNTY: Lake CITY, TOWN OR LOCATION: Crown Point

STREET AND NUMBER: 1809 W. 93rd Place Crown Point, Ind.

FATHER - NAME: Andrew Suhanik MOTHER MAIDEN NAME: Ann Kozak

DECEASED - NAME: Leo Cainrath MAILING ADDRESS: 1009 W. 93rd Place, Crown Point, Ind. 46308

DISPOSITION: Burial CEMETERY OR CREMATORY: Calumet Park Cemetery LOCATION: Merrillville, Ind.

DATE: April 28, 1980 FUNERAL HOME: Bendina Funeral Home, 5100 Cleveland St., Gary, Ind. 46408

NAME OF ATTENDING PHYSICIAN: John T. Seably, M.D. MAILING ADDRESS: Harrison Street, Merrillville, Ind. 46451

DATE SIGNED: May 2, 1980

CAUSE: ...

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