LTIC 49446

FILED

APR 6 1990

Anna N. Anton
AUDITOR LAKE COUNTY

094186

INDIANA STATE BOARD OF HEALTH
MEDICAL CERTIFICATE OF DEATH

Local No.

FUNERAL HOME No. 306

DECEASED

PARENTS

DISPOSITION

CAUSE

EMBALMER'S NAME James J. Krause

FUNERAL DIRECTOR'S SIGNATURE Gerald H. Rees

ADONIS	A	ENCL	Female
September 10, 1983			
White	58	Jan. 6, 1925	Lake
Hobart	St. Mary's Medical Center		D.A.A.
Illinois	U.S.A	Married	Joseph F. Lence
No			
354-20-0417	Home-maker	None	
IN	Lake	Hobart	
31 South Illinois Street			Yes
Lester M. [illegible] (deceased)		Mable	Atchinson
Joseph Lence, Inc.	31 South Illinois Street, Hobart, IN 46342		
Burial	Crain Funeral Home	Anna, Illinois	
September 11, 1983	Rees Funeral Home, Inc., 600 W. Ridge Road, Hobart IN 46342-4196		
John O. Carter, M.D.			2:30p
295 Wisconsin Street, Hobart, Indiana 46342			

THIS CERTIFIES THE ABOVE IS A TRUE AND COMPLETE COPY OF THE CERTIFICATE OF DEATH ON FILE WITH THE LAKE COUNTY HEALTH DEPT.

RECORDER'S OFFICE SEAL INDIANA

LAKE COUNTY HEALTH COMMISSIONER

No.

Earle & Davis Add. Pt Rt 7 Bl 26
50 X 100 Ft. Pt Rt 8 Bl 26
17-115-9

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881000
LAWYERS TITLE INS. CORP.
ONE PROFESSIONAL CENTER
SUITE 215
CROWN POINT, IN 46307

STATE OF INDIANA/S.S. NO.
LAKE COUNTY
FILED FOR RECORD
APR 9 8 54 AM '90
ROBERT [illegible]
RECORDER

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