

MAIL TO: ANDERSON, C. 8935 Broadway, Merrillville, IN 46410

MAIL TAX BILLS TO: Mrs. Lorraine M. Anderson Bateman 2712 1st Street Highland, IN 46182

INDIANA STATE BOARD OF HEALTH MEDICAL CERTIFICATE OF DEATH

Tax Key No. 33-211-11 State No.

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

Below for State Office Use

FUNERAL HOME No. 303

FUNERAL DIRECTOR'S LICENSE No. 1322

601

LICENSE No.

FUNERAL DIRECTOR'S LICENSE No. 1322

EMBALMER'S NAME: LAURENCE MILLER

FUNERAL DIRECTOR'S SIGNATURE

FUNERAL DIRECTOR'S SIGNATURE

THIS CERTIFIES THE ABOVE IS A TRUE AND COMPLETE COPY OF THE CERTIFICATE OF DEATH ON FILE WITH THE HAMMOND HEALTH DEPT. DEC 29 1986

HAMMOND HEALTH COMMISSIONER

6-4-68

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Medical Certificate of Death form with fields for DECEASED-NAME, RACE, DATE OF BIRTH, MARRIAGE STATUS, PARENTS, DISPOSITION, CAUSE, and SIGNATURES.

Vertical handwritten text: 33-211-11, Corryth, Highland 46182, 6/23/92, 55



FILED

JUN 23 1992

Auditor's signature: Anna H. Anton

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