

* ATTENTION ESTATE: Disclosure of the SS# we need to pursue our responsibilities is voluntary and there will be no penalty for refusal *

INDIANA STATE DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH STATE OF INDIANA LAKE COUNTY State No.

Local No. 0163-00

THE RECORDS IN THIS SERIES ARE CONFIDENTIAL PER IC 16-1-19-3

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

384638 TYPE/PRINT IN PERMANENT BLACK INK

Form with fields for DECEASED-NAME (Martha D. Bruette), SOCIAL SECURITY NUMBER (2000-005122), DATE OF BIRTH (Nov 20, 1922), FACILITY NAME (Community Hospital), MARRITAL STATUS (Married), SURVIVING SPOUSE (George Bruette), RESIDENCE (Cedar Lake, IN), FATHER'S NAME (William Mack), MOTHER'S NAME (Unavailable), MANNER OF DEATH (Natural), DATE OF INJURY (JAN 20 2000).

DECEDENT

PARENTS

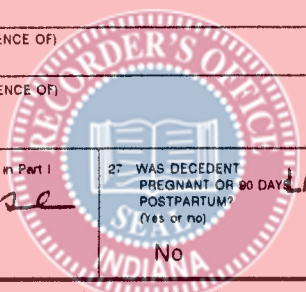
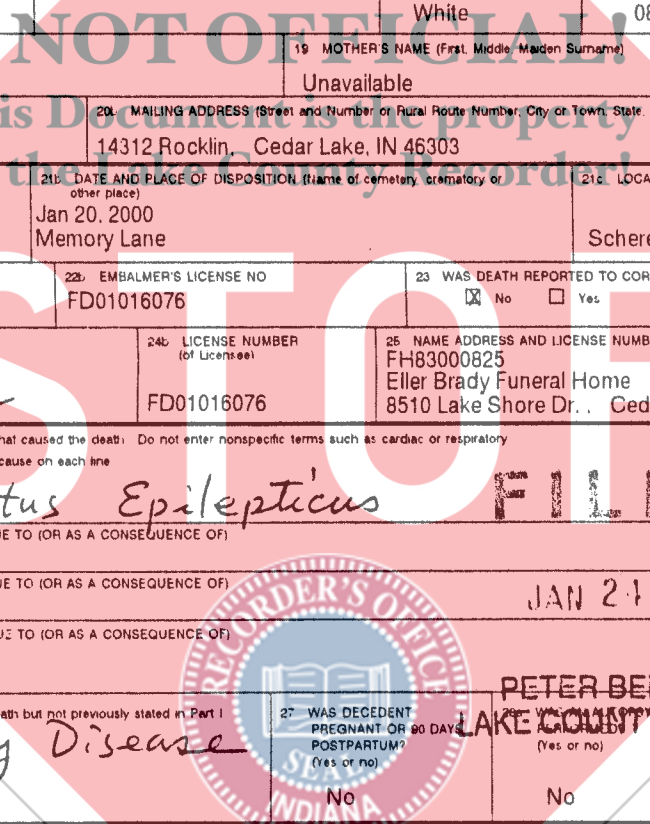
INFORMANT

DISPOSITION

CAUSE OF DEATH

CERTIFIER

HEALTH OFFICER



FILED

JAN 21, 2000

PETER BENJAMIN

LAKE COUNTY AUDITOR

00000

9-011

25 x 117