* ATTENTION ESTATE: The Social Security # is being requested by this state agency in order to pursue its statutory responsibility. Disclosure is voluntary and there will be no penalty for refusal.

2000-06706/ INDIANA STATE DEPARTMENT OF HEALTH

	I DECEASED-NAME (First N	Addie, Last)			2 SEX	30 TIME OF I	DEATH 36	DATE OF DEATH	March Cou Vol
TYPE/PRINT IN		ELISEO	GUZM		Male	6:25	$A_{M} \mid A$	ugust 11	1, 2000
PERMANENT BLACK INK	461-48-6616	Se AGE—Lest Birthdey (Years) 70	Sb UNDER 1 YEAR Months Days	Sc UNDER I		e of Birth (Ma. Day, Yr uary 24,19		Texas	State or Foreign Country
DEACK INK	86 WAS DECEDENT A US VETERAN?	86 YEAR LAST SERVED IN US ARMED FORCES?				E OF DEATH (Check on			
	No	N/A	HOSPITAL D Inpath		1,	OTHER Nursing H	ome 🗆 Osh	er (Specify)	
2525251.7	96 FACILITY NAME (If not institut] L] ER/O	utpatient DO		OR LOCATION OF DEA	TH Se	COUNTY OF DEA	TH .
DECEDENT	St. Catherine Hospital					ast Chicago		Lake	
\	10. MARTAL STATUS (Specify) Married 113. RESIDENCE—STATE Indiana 114. SURVIVING SPOUSE (If wife, give maiden pame) I 136. COUNTY Lake		Jucy Cary		ITS USUAL OCCUPATION (Give kind of work g most of working life Do not use retired) PENTET 13d STREET AND NUMB			Inland Steel Co.	
1			East Chic			r Street			
	13e ZIP CODE 13/ INSIDE CU	Y LIMITS 14 CITIZEN OF WHAT COUNTRY	15 WAS DECEDENT O	F HISPANIC OF	GIN7 TE	RACE-American India Black, White, etc.	n.		T'S EDUCATION
	46312 139 ON A FAR	36.17	Mexican Puene Ro Mexical	en. etc)		(Specify) Hispanic	Element	ary/Secondary (0-1)	
ARENTS	18 FATHER'S NAME (First, Middle	. Land			IS MOTHER'S	NAME (First Middle, Mar		· · · · · · · · · · · · · · · · · · ·	
	Blas 20a INFORMANT'S NAME (Type/		zman oun				Ca		a Balatanaha
NFORMANT	Lucy Guzman		3512	Fir Stre	et, Ea	Aural Rouge Number. Cry 18t Chciago	, In 4	6312" "	c Relationship Wife
	21a METHOD OF DISPOSITION Burial Gremation	Entombrent	21b DATE AND PLACE	OF DISPOSITION	Name of com	gery cremetory, or	21c LOCA	ATION—City or Tow	rn, State
	Buriel Gremation Dispersion Other (Special	Removal from State	St. John				Har	nmond,	IN
DISPOSITION	224 EMBALMERS NAME		220 EMBALMER'S L	ICENSE NO		23 WAS DEATH REP	ORTED TO C	ORONER?	
ļ	Charles Well		FDO104	2372			Yes		
	24 SIGNATURE OF FUNERAL DI	RECTOR		ENSE NUMBER		NAME ADDRESS AND			
	1 Jais	10 Lasti	FDC	0880001	'/	Oleska-Pas	LPICK	runerai	nome
			~/ > \	DOOUNT	4 39	934 Elm St	reet.	East Ch	icago. IN
	26 PART I Erger the Disease	or complications that cau	used the death Do not enter		3	934 Elm St	reet,	East Ch	icago, IN
	arrest, shock, or	injuries or complications that cause on heart failure. List only one cause on	used the death Do not enter	nenspecific terms	3		reet,	East Ch	Approximate Interval Betwee
	IMMEDIATE CAUSE (final disease or condition	heart failure. List only one cause on	used the death Do not enter	renspectic terms	3		reet,	East Ch	
AUSE OF	IMM/EDIATE CAUSE (final disease or condition resulting in deeth)	a DUE 30 (C)	used the deeth Do not enter a sech line Out Court OR AS A CONSEQUENCE A MARKET AND A CONSTRUCT A	ranspackia terma	3		ED	East Ch	Approximate Interval Between
EATH	IMMEDIATE CAUSE (final disease or condition resulting in death) Conditions if any, which gave rise to the immediate cause.	a DUE TO CC	ped the deed: Do not enter a sech line Out Out OR AS A CONSEQUENCE A A CONSEQUENCE OR AS A CONSEQUENCE OR AS A CONSEQUENCE	proposition terms or / or	3	FIL	ED	East Ch	Approximate Interval Between
EATH	MAMEDIATE CAUSE (final disease or condition resulting in deeth) Conditions: if any, which gave	DUE TO IC	used the deeth Do not enter a sech line Out Court OR AS A CONSEQUENCE A MARKET AND A CONSTRUCT A	proposition terms or / or	3		ED	East Ch	Approximate Interval Between
EATH	MAMEDIATE CAUSE (final disease or condition resulting in death) Conditions if any, which gave rise to the immediate cause, stating the underlying cause last	a DUE TO (C	De as a consequence	renspectic terms OT / OFF (ASE) OFF (ASE)	ouch as cardie	FIL SEP TA	ED 2000		Approximate interval Betwee Onset and Deat
EATH	IMMEDIATE CAUSE (final disease or condition resulting in deeth) Conditions if any, which gave rise to the immediate cause, stating the underlying	a DUE TO (C	De as a consequence	renspectic terms UT / CP / CP / CP / CP / CP / CP / CP / C	3	FIL SEP 14	ED	IN 286 WERE A	Approximate Interval Betwee Onset and Dear Dear Onset and Dear Dear Dear Dear Dear Dear Dear Dear
EATH	MAMEDIATE CAUSE (final disease or condition resulting in death) Conditions if any, which gave rise to the immediate cause, stating the underlying cause last	a DUE TO (C	De as a consequence	renspectic terms UT / CP / CP / CP / CP / CP / CP / CP / C	ouch as cardia	FIL SEP TA	2000 MANAM XXAU	IN 286 WERE A DITOROMON OF DEA	Approximate interval Betwee Onset and Deat and D
EATH	IMMEDIATE CAUSE (final disease or condition resulting in death) Conditions if any, which gave rise to the immediate cause, stating the underlying cause lest PART II Other significant conditions	Beart failure List only one cause on DUE TO (C C DUE TO (C d C C DUE TO (C d C C DUE TO (C d C DUE TO (C d D C DUE TO (C d D C D C D C D C D C D C D C D C D C	DR AS A CONSEQUENCE ON AS A CONSEQUENCE ON AS A CONSEQUENCE OF AS	nenspectic terms OT / OF AND A OF	VAS DECEDEN PREGNANT OR POSTPARTUM Ves or no)	FIL SEP TA	ED 2000 MAMAM No	IN 286 WERE A DITOROMON OF DEA	Approximate interval Betwee Onset and Deat Onset and Deat AUTOPSY FINDINGS IBLE PRIOR TO ETION OF CAUSE
EATH	MAMEDIATE CAUSE (final disease or condition resulting in death) Conditions if any, which gave rise to the immediate cause, stating the underlying cause last PART II Other significant conditions Chack only	a DUE TO (C	DR AS A CONSEQUENCE OF AS	penspecial terminal of the second of the sec	VAS DECEDEN PREGNANT OR OSTPARTUM Yes or no)	SEP TA	ED 2000 ANAM No	IN 286 WERE ADIT OF DEA	Approximate Interval Betwee Oneet and Dear One Dear Dear Dear Dear Dear Dear Dear Dea
EATH	IMMEDIATE CAUSE (final disease or condition resulting in death) Conditions if any, which gave rise to the immediate cause, stating the underlying cause last PART II Other significant conditions 29s CERTIFIER Check only one)	DUE TO (C d d) Conditions contributing to death be CALTH OFFICER On the basis of examine	Dead the deeth Do not enter a sech line OUL OUT OR AS A CONSEQUENCE OR AS A CONSEQUENCE OR AS A CONSEQUENCE OR AS A CONSEQUENCE OUT OR AS A CONSEQUENCE OUT OUT OUT OUT OUT OUT OUT OU	Part 1 27. W	VAS DECEDEN PREGNANT OR POSTPARTUM Yes or no)	SEP TA	2000 AND AND NO No as stated co and the to	IN 286 WERE A DITORIAN COMPLOY OF DEA	Approximate Interval Betwee Onset and Dear Dear Dear Dear Dear Dear Dear Dear
EATH	IMMEDIATE CAUSE (final disease or condition resulting in death) Conditions if any, which gave rise to the immediate cause, stating the underlying cause lest PART II Other significant conditions 29s CERTIFIER Chack only one)	DUE TO (C d d) Conditions contributing to death be CALTH OFFICER On the basis of examine	Dead the deeth Do not enter a sech line OUL OUT OR AS A CONSEQUENCE OR AS A CONSEQUENCE OR AS A CONSEQUENCE OR AS A CONSEQUENCE OUT OR AS A CONSEQUENCE OUT OUT OUT OUT OUT OUT OUT OU	Part 1 27. W	VAS DECEDEN PREGNANT OR POSTPARTUM Yes or no)	SEP TAKE COUNTY NO ce and due to the causele of the time, date, and piece and 28c. MEDICAL LICENS	2000 2000 2000 No. No. No. No. observation to the country of the country o	IN 286 WERE A COMPL OF DEA	Approximate Interval Betwee Onset and Dear Onset and Dear Onset and Dear Onset and Dear Onset and Onset an
RTIFIER	IMMEDIATE CAUSE (final disease or condition resulting in death) Conditions if any, which gave rise to the immediate cause, stating the underlying cause last PART II Other significant conditions 29s CERTIFIER Check only one)	DESTINATION OF THE DESIGN OF EXAMINE ENTIFIER The property of the basis of examine entifier The property of the prope	DE AS A CONSEQUENCE OF AS	Part I 27 W	VAS DECEDEN PREGNANT OR POSTPARTUM Yes or no)	SEP TAKE COUNTY No ce, and due to the causels of at the time, date, and piece and	2000 2000 2000 No. No. No. No. observation to the country of the country o	IN 286 WERE A COMPL OF DEA	Approximate Interval Betwee Onset and Dear Onset and Dear Onset and Dear Onset and Dear Onset and Onset an
EATH	BMMEDIATE CAUSE (final disease or condition resulting in deeth) Conditions if any, which gave rise to the immediate cause, stating the underlying cause last PART II Other significant conditions 296 CERTIFIER Check only HE (Check only One) CC	DESTINATION OF THE DESIGN OF EXAMINE ENTIFIER The property of the basis of examine entifier The property of the prope	DEATH (ITEM 28) (Type	Part I 27 W	PAS DECEDEN PREGNANT OR POSTPARTUM Yes or no) In deth occurred at the	SEP TO SE	2000 2000 2000 No. No. No. No. observation to the country of the country o	IN 286 WERE A COMPL OF DEA	Approximate Interval Betwee Onset and Deat Onset
RTIFIER	BAMMEDIATE CAUSE (final disease or condition resulting in death) Conditions if any, which gave rise to the immediate cause, stating the underlying cause last PART II Other significant conditions 296 CERTIFIER Chack only HE (Chack only One) HE 296 SIGNATURE AND TITLE OF CI	Conditions contributing to death be contributed to the basis of examine ERTIFER Conditions Contributed to death be conditions contributed to the basis of examine ERTIFER Conditions Completed Cause of the basis of examine contributed to the contributed to the basis of examine contributed to the contributed to t	DEATH (ITEM 28) (Type	Part I 27 W	PAS DECEDEN PREGNANT OR POSTPARTUM Yes or no) In deth occurred at the	SEP TO SE	2000 2000 2000 No. No. No. No. observation to the country of the country o	286 WERE / DIT PROVIDE OF DEA	Approximate Interval Betwee Onset and Dear Onset and Dear Onset and Dear Onset and Dear Onset and Onset an
ALTH FICER	IMMEDIATE CAUSE (final disease or condition resulting in death) Conditions if any, which gave rise to the immediate cause, stating the underlying cause last PART II Other significant conditions 29a CERTIFIER Check only one) 19b SIGNATURE AND TITLE OF CI 29b SIGNATURE AND ADDRESS OF PERS ##ELINE RUIZ,	CONDITION ON THE DESIGN OF INJUSTICE TO THE DATE OF INJUSTICE TO THE DESIGN	DEATH (ITEM 28) (Type LACON LONG DEATH (ITEM 28) (Type LACON LONG DEATH (ITEM 28) (Type LACON LONG LACON LON	occurred at the time opinion in my opinion, death	PRECEDENT OF PRECE	SEP TO SE	2000 2000 2000 No. No. No. No. No. No. No.	THE COUPLE OF DEAD THE COUPLE OF	Approximate Interval Betwee Oneet and Dear One
ERTIFIER ALTH FICER	BAMMEDIATE CAUSE (final disease or condition resulting in death) Conditions if any, which gave rise to the immediate cause, stating the underlying cause last PART II Other significant conditions 29a CERTIFIER CERTIFIER CERTIFIER CONDITIONS 29b SIGNATURE AND ADDRESS OF PERSECTION ON CERTIFIER	CONDITION ON THE BEST OF SON WHO COMPLETED CAUSE OF SON WHO CAUSE OF SON WHO CAUSE OF SON WHO COMPLETED CAUSE OF SON WHO CAUSE OF SON WHO CAUSE OF SON WHO C	DEATH (ITEM 28) (Type LACON LONG DEATH (ITEM 28) (Type LACON LONG DEATH (ITEM 28) (Type LACON LONG LACON LON	occurred at the button in my opinion death	PRECEDEN PRE	SEP TO SE	2000 2000 2000 No. No. No. No. No. No. No.	THE COUPLE OF DEAD THE COUPLE OF	Approximate Interval Betwee Oneet and Deat One
EATH EATH ALTH FICER	BMMEDIATE CAUSE (final disease or condition resulting in death) Conditions if any, which gave rise to the immediate cause, stating the underlying cause last PART II Other significant conditions 29a CERTIFIER Chack only Conditions 29b SIGNATURE AND TITLE OF CITY One) 30 NAME AND ADDRESS OF PERS ### CONDITION OF CITY OF	ERTIFYING PHYSICIAN To the busic of examine ERTIFIER DRONER On the basis of examine ERTIFIER SON WHO COMPLETED CAUSE (Month Dey, Veer)	DR AS A CONSEQUENCE OF AS	Part I 27. W I I I I I I I I I I I I I I I I I I	VAS DECEDEN PREGNANT OR POSTPARTUM Yes or no) The date, and plan to deter occurred at the (AT WORK? no)	SEP TO SE	2000 2000 No. No. No. No. No. No. No.	28b WERE A COMPL OF DEA	Approximate interval Betwee Oneet and Dear One
ATH ALTH FICER	BAMMEDIATE CAUSE (final disease or condition resulting in death) Conditions if any, which gave rise to the immediate cause, stating the underlying cause last PART II Other significant conditions 29a CERTIFIER CERTIFIER CERTIFIER (Check only one) HE 30 NAME AND ADDRESS OF PERS ### ### ### ### ### ### ### ### #### ####	The Physician To the business of examinating and the physician To the business of examinating the physician To the business of examinating and physician To	ped the deeth Do not enter the Colling OR AS A CONSEQUENCE OR AS A CON	occurred at the tunion in my opinion, death 34c INJURY (Yes or	PRECIDENT OF POSTPART UM Yes or no) (AT WORK? no) 34f L	SEP TAIL SEP	2000 2000 2000 No.	28b WERE A COMPL OF DEA	Approximate interval Betweet Oneet and Deer Oneet and Oneet a
ATH ALTH FICER	BMMEDIATE CAUSE (final disease or condition resulting in death) Conditions if any, which gave rise to the immediate cause, stating the underlying cause last PART II Other significant conditions 29a CERTIFIER Chack only Conditions 29b SIGNATURE AND TITLE OF CITY One) 30 NAME AND ADDRESS OF PERS ### CONDITION OF CITY OF	The Physician To the business of examinating and the physician To the business of examinating the physician To the business of examinating and physician To	DR AS A CONSEQUENCE OF AS	occurred at the tunion in my opinion, death 34c INJURY (Yes or	PRECIONATION PRECI	SEP TAIL SEP	2000 2000 2000 No.	28b WERE A COMPL OF DEA	Approximate interval Betwee Oneet and Dec On

25×



Ufficial Stamp

2000 067061

2010 \$12 14 721 10: 14

MOTALS WILD STEAM

Document Mail Back to Information Sheet

This is where you want the recorded document sent back to when it has completed the recording process.

Name Lucy Guzman
Address 35/2 Fir St.
City Stzip FAST Chicago FM 46312
Telephone <u>219 - 398-6632</u>
Signature Printed Lucy Guzman
Signature Written
Date of Signature 9-14-00
Check Number
Check Amount CASh 9,00

Office Use Only

Check Equals Amount Due	□Yes	□No	<u>. </u>
Total			
Initials		Ae	