

FILE # 36-5034

STATE FILE NUMBER 605250

MEDICAL CERTIFICATE OF DEATH

REGISTRATION DISTRICT 16.10 REGISTERED NUMBER

DECEASED-NAME FIRST MIDDLE LAST  
 1. CARL FOSTER MALE  
 DATE OF BIRTH 3. SEPTEMBER 15, 1997  
 DATE OF DEATH 3. SEPTEMBER 15, 1997

2. SEX  
 3. DATE OF BIRTH (MONTH DAY YEAR)  
 4. COUNTY OF DEATH COOK  
 5. DATE OF DEATH (MONTH DAY YEAR)

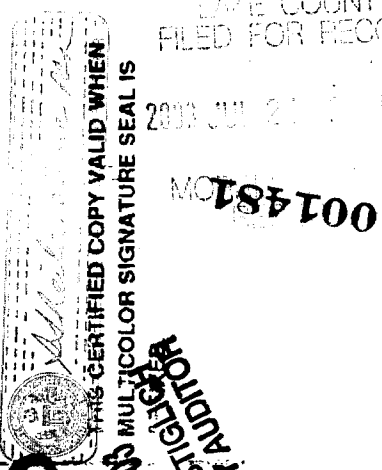
6. CHICAGO  
 7. ASHVILLE, NC  
 8. MARRIED  
 9. YES  
 10. 238 42 0241  
 11. EXPEDITOR  
 12. FOUNDRY  
 13. 7513 KENTUCKY  
 14. WHITE  
 15. WALTON  
 16. FOSTER  
 17. PAULINE ROBERSON  
 18. PART I  
 19. RESPIRATORY FAILURE  
 20. SEPTEMBER 15, 1997  
 21. HERITAGE CREMATORY  
 22. PRETTI VEMURI, M.D.  
 23. PRETTI VEMURI, M.D., 333 E. HURON, CHGO., IL 60611  
 24. HERITAGE CREMATORY  
 25. ELMWOOD CHAPEL, 11200 S. EWING AVE., CHICAGO, ILLINOIS 60617

STATE OF ILLINOIS  
COUNTY OF COOK  
CITY OF CHICAGO

SEP 19 1997

I, SHEILA LYNE, RSW, LOCAL REGISTRAR OF VITAL STATISTICS OF THE CITY OF CHICAGO, DO HEREBY CERTIFY THAT I AM THE KEEPER OF THE RECORDS OF BIRTHS, STILLBIRTHS AND DEATHS FOR THE CITY OF CHICAGO BY VIRTUE OF THE LAWS OF THE STATE OF ILLINOIS AND THE ORDINANCES OF THE CITY OF CHICAGO; THAT THE ACCOMPANYING CERTIFICATE ON THIS SHEET IS A TRUE COPY OF A RECORD KEPT BY ME IN PURSUANCE OF SAID LAWS AND ORDINANCES.

75522



FILED FOR RECORD

2000 JUL 21

00148100

FILED JUL 21 1997  
CLERK COUNTY AUDITOR

Mary Helen Foster  
9,000  
RP  
Cash

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Funeral Director's Signature: *Albina Lopez*  
LOCAL REGISTRAR'S SIGNATURE: *Sheila Lyne*