

LIFE OR PRINT
PLAINLY WITH
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RECORD

Below for State Office Use

DEPARTMENT OF HEALTH
STATE OF INDIANA
BUREAU OF VITAL RECORDS

INDIANA STATE BOARD OF HEALTH
CORONER'S CERTIFICATE OF DEATH

State No. 30-386-11

Disposition Permit
Issued /
Provisional Certificate
 Yes No

EMBALMER'S NAME: Ronald A. Reed
FUNERAL DIRECTOR'S SIGNATURE: [Signature]
LICENSE No. 2004 037585
FUNERAL HOME LICENSE No. 1536
FUNERAL HOME No. 750

DECEASED: CECELIA POPOVICH
MARRIAGE: NONE
HANDDOOR: NONE
CAUSE: Myocardial infarction

DECEASED NAME: CECELIA POPOVICH
AGE: 47
SEX: Female
DATE OF BIRTH: 6/12/1936
COUNTY OF DEATH: Lake
RESIDENCE STATE: Indiana
CITY/TOWN: Griffith
STREET AND NUMBER: 742 N. Lafayette
HOSPITAL OR OTHER INSTITUTION: St. Catherine Hospital
MARRIED: YES
SPOUSE: George Popovich
OCCUPATION: Office worker
USUAL OCCUPATION: Office worker
N.I.P.S. CO.
MAY 6 2004
STEPHEN R. STIGLICH
CORONARY artery disease

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