

Key # 35-22518

Local No. 140-82

# LAKE COUNTY BOARD OF HEALTH

## MEDICAL CERTIFICATE OF DEATH

Form No. 3085

1. DECEASED NAME <b>THERESA</b>		2. SEX <b>FEMALE</b>		3. DATE OF DEATH <b>JAN. 15, 1982</b>	
4. WVA No. <b>66</b>		5. DATE OF BIRTH <b>SEPT. 11, 1915</b>		6. COUNTY OF DEATH <b>LAKE</b>	
7. CITY, TOWN OR LOCATION OF DEATH <b>MUNSTER</b>					
8. STATE OF BIRTH <b>INDIANA</b>					
9. U.S.A.					
10. SOCIAL SECURITY NUMBER <b># 357-07-6143</b>					
11. MARITAL STATUS <b>Married</b>					
12. USUAL OCCUPATION <b>Housewife</b>					
13. CITY, TOWN OR LOCATION <b>Home</b>					
14. INDIANA COUNTY <b>LAKE</b>					
15. RESIDENCE ON A FARM <b>NO</b>					
16. MELTING <b>JUN - 7 2005</b>					
17. VERONICA Kolonowski					
18. JOHN Sadler (husband)					
19. St. John Cemetery					
20. Ovens funeral Home					
21. 1126 N. MAINE ST., CROWN POINT, IND. 46307					
22. WILLIAM J. PIERCE, M.D.					
23. CHRONIC Generalized Seborrheic Dermatitis					
24. JUN 10 1982					

TYPE OR PRINT  
 PLAINLY WITH  
 UNFADING INK  
 THIS IS A  
 PERMANENT  
 RECORD  
 Below for Death Office Use

DECEASED  
 LOCAL RESIDENCE  
 LIVED IN DEATH  
 OCCURRED IN  
 INSTITUTION OR  
 PERMANENT RESIDENCE  
 ADDRESS

REGISTRAR'S  
 SEAL

EMERALD DIRECTOR'S SIGNATURE  
 LICENSE NO. 104  
 EMERALD DIRECTOR'S SIGNATURE  
 LICENSE NO. 965  
 EMERALD DIRECTOR'S SIGNATURE  
 LICENSE NO. 729

STATE OF INDIANA  
 LAKE COUNTY  
 FILED FOR RECORD  
 2005 JUN - 7 AM 9:43  
 MICHAEL J. BROWN

1 2005 046845  
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THIS CERTIFIES THE ABOVE IS TRUE AND COMPLETE  
 COPY OF THE CERTIFICATE OF DEATH ON FILE WITH THE  
 LAKE COUNTY HEALTH DEPARTMENT

15 years  
 JUN 10 1982  
 AUTHORITY: Chapter 16 of the  
 I.C. Code

9/5 pm