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TYPE OR PRINT
PLAINLY WITH
UNFADING INK
THIS IS A
PERMANENT
RECORD

Below for State Office Use

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THIS CERTIFIES THE FOLLOWING IS A TRUE AND COMPLETE COPY OF DEATH RECORD AS FILED WITH THE HAMMOND HEALTH DEPARTMENT
Date Issued: MAY 23 2005
Hammond Health Commissioner

Disposition Permit Issued / Provisional Certificate
 Yes No

EMBALMER'S NAME: John Alexander
FURNAL DIRECTOR'S SIGNATURE: [Signature]
FURNAL DIRECTOR'S LICENSE NO.: 2497
FURNAL HOME: 286

Local No. 961
TYPE OR PRINT IN PERMANENT INK FOR INSTRUCTIONS SEE HANDBOOK
DECEASED

INDIANA STATE BOARD OF HEALTH CORONER'S CERTIFICATE OF DEATH

State No.

1 DECEASED—NAME: NADINE SKIBA; SEX: Female; DATE OF DEATH: December 4, 1982

2 RACE: White; AGE: 50; DATE OF BIRTH: 6/2/23/31; COUNTY OF DEATH: Lake

3 CITY, TOWN OR LOCATION OF DEATH: Hammond

4 HOSPITAL OR OTHER INSTITUTION: 6925 Northcote

5 STATE OF BIRTH: U.S.A.

6 MARRIED, NEVER MARRIED, WIDOWED, DIVORCED, SEPARATED: Married

7 SURVIVING SPOUSE: John Skiba

8 USUAL OCCUPATION: Housewife

9 KIND OF BUSINESS OR INDUSTRY: Own Home

10 RESIDENCE—STATE: Indiana; COUNTY: Lake; CITY, TOWN OR LOCATION: Hammond

11 STREET AND NUMBER: 6925 Northcote

12 IS DECEASED OF SPANISH DESCENT? NO

13 FATHER—NAME: Louis Gatch; RELATIONSHIP: husband

14 MOTHER—MAIDEN NAME: Bertha Veliekas

15 MARRIAGE—DATE: December 7, 1982

16 HEALTH OF DECEASED: Pulmonary thromboemboli

17 HEALTH OF CERTIFIER: Albert T. Willardo, M.D.

18 DATE OF DEATH: December 4, 1982

19 TIME OF DEATH: 4:40 p.m.

20 PLACE OF DEATH: V. Huber Funeral Home, 7051 Kennedy, Hammond, IN

21 PLACE OF BURIAL: St. John Cemetery, Hammond, Indiana

22 DATE RECEIVED BY LOCAL HEALTH OFFICER: DEC 9 1982

23 CAUSE OF DEATH: Pulmonary thromboemboli

24 YES

COMMUNITY TITLE COMPANY 02396
FILE NO 231206

University Gardens lot 6 Block 1
(26) 36-0491-0006