

REGISTRATION DISTRICT NO. 16.10

MEDICAL CERTIFICATE OF DEATH

STATE OF ILLINOIS
STATE FILE NUMBER
612212

STATE OF ILLINOIS
COUNTY OF COOK
CITY OF CHICAGO

AUG 29 2005

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COUNTY OF COOK
CITY OF CHICAGO

DECEASED-NAME
MICHAEL

FIRST
MICHAEL

MIDDLE
A.

LAST
ROTH

SEX
2 MALE

DATE OF BIRTH
AUGUST 28, 2005

CITY
CHICAGO

COUNTY
CHICAGO

STATE
ILLINOIS

CITY OF BIRTH
CHICAGO

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ILLINOIS

COUNTY OF DEATH
CHICAGO

CITY TOWN, TWP. OR ROAD DISTRICT NUMBER
CHICAGO

AGE-LAST BIRTHDAY (YRS)
4. 62

UNDER 1 YEAR
MOS. DAYS HOURS MIN.

DATE OF BIRTH
AUGUST 28, 2005

CITY OR TOWN
CHICAGO

STATE
ILLINOIS

CITY OF BIRTH
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CHICAGO

STATE OF BIRTH
ILLINOIS

RESIDENCE (STREET AND NUMBER)
2966 W. 76th Lane

CITY, TOWN, TWP. OR ROAD DISTRICT NO.
Merrillville

INSIDE CITY (YES/NO)
YES

COUNTY
Lake

STATE
Indiana

ZIP CODE
46410

RACE (WHITE, BLACK, AMERICAN INDIAN, etc.)
White

FATHER-NAME
John

MOTHER-NAME
Rosemary Groyan

RELATIONSHIP
HOSPITAL RECORDS

MAILING ADDRESS (STREET AND NO. OR P.O. BOX, CITY OR TOWN, STATE, ZIP)
3841 SOUTH MARYLAND CHICAGO, ILLINOIS 60637

IMMEDIATE CAUSE (Final disease or condition resulting in death)
RESPIRATORY ARREST DUE TO OVERWHELMING PHILMONARY INFECTION

CONDITIONS, IF ANY WHICH GAVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST.
(b) ACUTE MYELOID LEUKEMIA DUE TO OR AS A CONSEQUENCE OF

PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in PART I.

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20b.

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NAME AND ADDRESS OF CERTIFIER
22c. SHEPHERD SHAH, MD
5841 SOUTH MARYLAND CHICAGO, ILLINOIS 60637

NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER
22c. RUSSELL B HALL, MD

BURIAL, CREMATION, REMOVAL (SPECIFY)
24a. Burial

CEMETERY OR CREMATORY-NAME
Calumet Park Cem.

LOCATION
Merrillville, Ind

CITY OR TOWN
Merrillville, Ind

STATE
Indiana

DATE
9-1-2005

FUNERAL HOME
Funeral Services Inc.

STREET AND NUMBER OR R.F.D.
4431 Cascara Ln.

CITY OR TOWN
Lisle, Illinois

STATE
Illinois

ZIP
60532

FUNERAL DIRECTOR'S SIGNATURE
25b.

LOCAL REGISTRAR'S SIGNATURE
26a.

DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR)
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