



INDIANA STATE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

Local No. 321-08

State No.

Form containing fields for decedent's name (Helen JOSEPHINE Golec), sex (Female), date of death (February 1, 2008), birth date (December 2, 1917), residence (Crown Point, Indiana), and cause of death (Failure to Thrive, Dementia).

BURNET TITLE 45-07-31-402-006000-026

FILED SEP 2 2008

PEGGY HOLINGA KATONA LAKE COUNTY AUDITOR

