

CERTIFICATE OF DEATH

L 40622

Registration District No. 045-70 Local No. _____

1. DOLORES ELIZABETH BELLS					2. F	3. JULY 8, 2008	
4. 150-16-0027	5. 82	6. 5-4-1926		7. HUDSON CO., N.J.			
8. NO		9a. PLACE OF DEATH (Check only one) HOSPITAL: <input checked="" type="checkbox"/> Inpatient <input type="checkbox"/> ER/Outpatient <input type="checkbox"/> DOA OTHER: <input type="checkbox"/> Nursing Home <input type="checkbox"/> Residence <input type="checkbox"/> Other (Specify)					
9b. PARDEE HOSPITAL		9c. HENDERSONVILLE		9d. YES		9e. HENDERSON	
10. WIDOWED		11. ---		12a. HOME MAKER		12b. OWN HOME	
13a. N.C.		13b. HENDERSON		13c. HENDERSONVILLE		13d. 2601 CHIMNEY ROCK ROAD	
13e. YES		13f. 28792		14. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		15. WHITE	
17. DANIEL McNEILL		18. ANNE SCULLY					
19a. ALANA INDELICATO		19b. 274 JAMES WAY, HENDERSONVILLE, N.C.				19c. 28792	
Part I. Enter the diseases, injuries, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock or heart failure. If appropriate, enter tobacco, alcohol, or drug use. List only one cause on each line. (PRINT or TYPE)							Approximate Interval Between Onset and Death
IMMEDIATE CAUSE (Final disease or condition resulting in death) → C.H.F.							FILED
a. DUE TO (OR AS A CONSEQUENCE OF):							
b. DUE TO (OR AS A CONSEQUENCE OF): NOV - 5 2008							
c. DUE TO (OR AS A CONSEQUENCE OF): PEGGY HOLINGA KATONA LAKE COUNTY AUDITOR							
20b. marked obesity							
21a. NO							21c. NO
23a. _____							23b. 7-11-08
24. LO Russell was Sr Balsam Home NC 28792							
25a. <input checked="" type="checkbox"/> Other		25b. ANTOMBMENT HOLY CROSS CEMETERY		25c. CALUMET CITY, IL. 60409			
26a. JOHN J. MINICH F.H., CHICAGO, IL 60655		26b. JOHN J. MINICH		26c. 034-011151			
27. Thomas S. [Signature]		28. 7/16/2008		26d. STANLEY E. COMBS		26e. NCFSL 2698	

DECEDENT

PARENTS

INFORMANT

CAUSE OF DEATH

CERTIFIER

DISPOSITION

COMMUNITY TITLE COMPANY
FILE NO L 40622

DHHS 1872
(Revised 3/03
Review 3/06)
VITAL RECORDS

Henderson County, N.C.
This certifies that the foregoing is a true and accurate copy of the record filed in the office of the Register of Deeds.
Witness my hand and official seal this JUL 16 2008

Nedra W. Moles, Register of Deeds
by: [Signature]
Assistant/Deputy Register of Deeds

017408

11CM
9B