



INDIANA STATE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

Local No. 1572-09

State No.

Form with fields for decedent name (PATRICIA A. GLASGOW), date of death (APRIL 15, 2009), cause of death (CARCINOMA OF THE LUNG), and certifier information (Claude A. Forest).

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FILED APR 30 2009

REGGY HOLINGA KATONA LAKE COUNTY AUDITOR

Vertical stamp: MEMORANDUM FOR THE RECORD, APR 16 2009, 1:32 PM, and handwritten numbers 1100, 36, 910.