

TYPE OF PRINT  
REVERSE WITH  
UNFADING INK  
THIS IS A  
PERMANENT  
RECORD

State of Indiana, Office of the

INDIANA  
LAMI COUNTY  
FILED FOR RECORD  
2009 OCT 28 AM 10:16  
MICHAEL A. BROWN  
RECORDER

2009 072317

EMBALMER'S NAME Roosevelt Allen LICENSE No. 5170  
FUNERAL DIRECTOR'S SIGNATURE Roosevelt Allen FUNERAL DIRECTOR'S LICENSE No. 270 FUNERAL HOME No. 770

Local No.

1998-81

LAKE COUNTY BOARD OF HEALTH  
MEDICAL CERTIFICATE OF DEATH

1. Name: Ines  
2. Sex: Female  
3. Date of Birth: Dec. 14, 1981  
4. Race: Black  
5. Date of Death: 5/9/1990  
6. Cause of Death: MI  
7. Place of Death: Housekeeper

8. Place of Birth: Methodist Hospital South-Lake  
9. Usual Residence: Housekeeper  
10. Usual Residence Address: 426-26-3179 D6  
11. Usual Residence City: Indiava  
12. Usual Residence State: Ind  
13. Usual Residence Country: U.S.A.

14. Name of Physician: Dr. Garry  
15. Address: 565 Porter St.  
16. City: Gary  
17. State: Ind  
18. Date of Report: 5/9/1990

19. Name of Coroner: Guy & Allen Funeral Directors  
20. Address: 2959 W. 11th Ave Gary, Ind  
21. City: Gary  
22. State: Ind  
23. Date of Report: 5/9/1990

24. Name of Burial Place: Buzial  
25. Address: 565 Porter St.  
26. City: Gary  
27. State: Ind  
28. Date of Burial: 5/9/1990

29. Name of Attending Physician: Dr. Garry  
30. Address: 565 Porter St.  
31. City: Gary  
32. State: Ind  
33. Date of Report: 5/9/1990

34. Name of Embalmer: Roosevelt Allen  
35. Address: 2959 W. 11th Ave Gary, Ind  
36. City: Gary  
37. State: Ind  
38. Date of Report: 5/9/1990

39. Name of Funeral Director: Roosevelt Allen  
40. Address: 2959 W. 11th Ave Gary, Ind  
41. City: Gary  
42. State: Ind  
43. Date of Report: 5/9/1990

44. Name of Medical Examiner: Dr. Garry  
45. Address: 565 Porter St.  
46. City: Gary  
47. State: Ind  
48. Date of Report: 5/9/1990

RECOVERING INDIAN COUNTY  
DAVE COONITT-RECORDING

FILED

OCT 28 2009

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