



INDIANA STATE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

BT 9006 28

108-08

Local No.

State No.

CHICAGO TITLE INSURANCE COMPANY

Form with fields for decedent name (Helen Mistarz Konarczewski), date of death (Feb. 27, 2008), cause of death (Respiratory arrest), and certifier information (Fred Adler, MD).

NOT OFFICIAL
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FILED
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PEGGY HOLINGA KATONA
LAKE COUNTY AUDITOR

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APPROXIMATE INTERVAL: ONSET TO DEATH
3 hrs
10 min
15 sec

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