



INDIANA STATE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

Local No. 1635-10

Form with fields for Decedent's Name (Julius H. Crick), Social Security Number (400-30-8264), Date of Birth (March 14, 1925), Date of Death (May 23, 2010), Cause of Death (end stage Parkinson's disease), and Signatures (J. Navarro, Susan J. Best).

FILED DEC 20 2011 PEGGY HOLINGA KATONA LAKE COUNTY AUDITOR

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May 26, 2010