

UNOFFICIAL COPY

STATE OF ILLINOIS } **DAVID D. ORR.** County Clerk JAN 10 2000
 County of Cook

I, **DAVID D. ORR**, County Clerk of the County of Cook, in the State aforesaid, and Keeper of the Records and Files of said County, do hereby certify that the attached is a true and correct copy of the original Record on file, all of which appears from the records and files in my office.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Seal of the County of Cook, at my office in the City of Chicago, in said County.

David D. Orr
 County Clerk

DECEASED B C D E CAUSE N P CERTIFIER DISPOSITION	1 4 6a 6b 7a 7b 8 9 10 11a 11b 12 13a 13b 13c 13d 14a 14b 14c 15 16 17a 17b 18 PART I 19a 19b 20a 20b 20c 21a 21b 21c 22a 22b 22c 23 24a 24b 24c 25a 25b 25c 26a 26b	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">REGISTRATION DISTRICT (N.Y.) <i>16-24</i></td> <td colspan="2" style="text-align: center;">STATE OF ILLINOIS</td> <td colspan="2" style="text-align: right;">STATE FILE NUMBER</td> </tr> <tr> <td colspan="2">REGISTERED NUMBER <i>918</i></td> <td colspan="4" style="text-align: center; font-weight: bold;">MEDICAL CERTIFICATE OF DEATH 91-076312</td> </tr> <tr> <td colspan="3">DECEASED NAME FIRST MIDDLE LAST EDMUND J GUINANE</td> <td>SEX MALE</td> <td colspan="2">DATE OF DEATH (MONTH DAY YEAR) DEC 3, 1991</td> </tr> <tr> <td>COUNTY OF DEATH COOK</td> <td>AGE - LAST BIRTHDAY (YRS) MO DAY HR MIN 80</td> <td>UNDER 1 YEAR MO DAY HR MIN 5a</td> <td>UNDER 1 DAY HR MIN 5c</td> <td colspan="2">DATE OF BIRTH (MONTH DAY YEAR) MARCH 1, 1911</td> </tr> <tr> <td colspan="2">CITY, TOWN, TWP. 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