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Mail to  
Isadore J. Stein  
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Chicago, IL 60602  
Suite 1023

COOK COUNTY CLERK'S OFFICE  
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CHICAGO, ILL. 60602  
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DEPARTMENT OF HEALTH - CITY OF CHICAGO

NOV. 1, 1988

ILLINOIS  
COUNTY OF COOK  
CITY OF CHICAGO

L. LOMBE C. EDWARDS MD. M.P.A.  
LOCAL REGISTRAR OF VITAL STATISTICS  
OF THE CITY OF CHICAGO, DO HEREBY  
CERTIFY THAT I AM THE KEEPER OF  
THE RECORDS OF BIRTH, STILLBIRTHS  
AND DEATHS OF THE CITY OF CHICAGO  
BY VIRTUE OF THE LAWS OF THE  
STATE OF ILLINOIS AND THE  
ORDINANCES OF THE CITY OF CHICAGO.  
THAT THE ACCOMPANYING CERTIFICATE  
ON THIS SHEET IS A TRUE COPY AS A  
RECORD KEPT BY ME IN PURSUANCE OF  
SAID LAWS AND ORDINANCES.

THIS CERTIFIED COPY VALID  
WHEN MULTICOLOR SEAL AND  
TRUE SIGNATURE ARE AFFIXED

88332386  
621806

## MEDICAL CERTIFICATE OF DEATH

REGISTRATION DISTRICT NO. 16.10  
REGISTERED NUMBER

1. NAME SAMUEL HARRIS	SEX MALE	DATE OF BIRTH OCTOBER 27, 1988	COUNTY OF BIRTH Cook
2. RACE BLACK	DATE OF DEATH OCTOBER 27, 1988	PLACE OF DEATH Cook	DEATH STATUS INPATIENT
3. CITY OF DEATH Chicago	DATE OF DEATH OCTOBER 27, 1988	PLACE OF DEATH Cook	DEATH STATUS INPATIENT
4. STATE OF BIRTH ALABAMA	DATE OF DEATH OCTOBER 27, 1988	PLACE OF DEATH Cook	DEATH STATUS INPATIENT
5. SOCIAL SECURITY NUMBER 350 IC 0702	DATE OF DEATH OCTOBER 27, 1988	PLACE OF DEATH Cook	DEATH STATUS INPATIENT
6. STREET AND NUMBER 7713 SOUTH WABASH	DATE OF DEATH OCTOBER 27, 1988	PLACE OF DEATH Cook	DEATH STATUS INPATIENT
7. CITY CHICAGO	DATE OF DEATH OCTOBER 27, 1988	PLACE OF DEATH Cook	DEATH STATUS INPATIENT
8. STATE ILLINOIS	DATE OF DEATH OCTOBER 27, 1988	PLACE OF DEATH Cook	DEATH STATUS INPATIENT
9. FATHER'S NAME ELISER HARRIS	DATE OF DEATH OCTOBER 27, 1988	PLACE OF DEATH Cook	DEATH STATUS INPATIENT
10. MOTHER'S NAME FLORA LEE	DATE OF DEATH OCTOBER 27, 1988	PLACE OF DEATH Cook	DEATH STATUS INPATIENT
11. RELATIONSHIP ADMITTING OFFICER	DATE OF DEATH OCTOBER 27, 1988	PLACE OF DEATH Cook	DEATH STATUS INPATIENT
12. ADDRESS STEVENSON EXPRESSWAY AT KING DRIVE	DATE OF DEATH OCTOBER 27, 1988	PLACE OF DEATH Cook	DEATH STATUS INPATIENT
13. DEATH WAS CAUSED BY LEFT CEREBRAL VASCULAR ACCIDENT	DATE OF DEATH OCTOBER 27, 1988	PLACE OF DEATH Cook	DEATH STATUS INPATIENT
14. OTHER SIGNIFICANT CONDITIONS CARCINOMATOSIS (PRIMARY LEFT LUNG)	DATE OF DEATH OCTOBER 27, 1988	PLACE OF DEATH Cook	DEATH STATUS INPATIENT
15. DATE OF OPERATION OCTOBER 27, 1988	DATE OF DEATH OCTOBER 27, 1988	PLACE OF DEATH Cook	DEATH STATUS INPATIENT
16. SIGNATURE Theodore Christou	DATE OF DEATH OCTOBER 27, 1988	PLACE OF DEATH Cook	DEATH STATUS INPATIENT
17. DR. THEODORE CHRISTOU M.D. 9050 WEST JUSTICE ILLINOIS 60458	DATE OF DEATH OCTOBER 27, 1988	PLACE OF DEATH Cook	DEATH STATUS INPATIENT
18. LOCAL REGISTRAR'S SIGNATURE L. Lombe C. Edwards	DATE OF DEATH OCTOBER 27, 1988	PLACE OF DEATH Cook	DEATH STATUS INPATIENT
19. LOCAL REGISTRAR'S SIGNATURE L. Lombe C. Edwards	DATE OF DEATH OCTOBER 27, 1988	PLACE OF DEATH Cook	DEATH STATUS INPATIENT

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