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98831205-1

STATE OF ILLINOIS

MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER

DATE OF DEATH 03031205

REGISTRATION DISTRICT NO 16:33 REGISTERED NUMBER 26

DATE OF BIRTH 3 JANUARY 3, 1989

SEX 2 MALE

AGE LAST BIRTHDAY (YR) 52 08 50

CITY, TOWN, TWP, OR ROAD DISTRICT NUMBER COOK

DATE OF DEATH 3 JANUARY 3, 1989

DATE OF BIRTH 30 MAY 1, 1920

HOSPITAL OR OTHER INSTITUTION NAME

CITY, TOWN, TWP, OR ROAD DISTRICT NUMBER CHICAGO

NAME OF SURVIVING SPOUSE

NAME OF SURVIVING SPOUSE

USUAL OCCUPATION Janitor

RESIDENCE (STREET AND NUMBER) 9256 S NORMAL

NAME OF BUSINESS OR INDUSTRY

RESIDE CITY CHICAGO

RACE (WHITE, BLACK, AMERICAN INDIAN OR HISpanic)

FATHER-NAME FIRST MIDDLE LAST

DATE OF BIRTH 1341 COOK

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I HEREBY CERTIFY THAT THE FOREGOING IS A TRUE AND CORRECT COPY OF THE DEATH RECORD OF THE PERSON IN ITEM #1 AND THAT THIS RECORD WAS ESTABLISHED AND FILED IN MY OFFICE IN ACCORDANCE WITH THE PROVISIONS OF THE ILLINOIS STATUTES RELATING TO THE REGISTRATION OF BIRTHS, STILLBIRTHS, AND DEATHS.

DATE JANUARY 9, 1989 AT EVERGREEN PARK, ILLINOIS

REGISTRAR [Signature] DEPUTY REGISTRAR

Funeral Home: Brobbins Funeral Home, Ltd., 9315 S. Ashland, Chicago, Illinois 60620

Local Registrar's Signature: [Signature]

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