RIGINAL	CORONER'S CERT	IFICATE OF DEP	TH STATE NO.	
DECEDENT'S BIRTH NO.:	STATE OF	F ILLINOIS		ic. 355
L PLACE OF DEATH		2. USUAL RESIDENCE (Where	b. COUNTY	
Peoria	ILLINOIS	Illinois	Peoria	
b. CITY (If outside corporate limits, wi	rite RURAL and give o. LENGTH OF township) STAY (in this place)	o. CITY (If outside corporate	limits, write RURAL and give t	ownship)
TOWN City-Peori	19 30 Vrs	TOWN City-Per	oria	151 2 3
d. FULL NAME OF (If not in hospital	or institution, give street address or location)	ADDRESS	give location)	WEIN
100	Baldwin Ave	108 Ba	The state of the s	
DECEASED a. (First)	b. (Middle)	c. (Last)	4. DATE (Month)	(Day) (Year)
Type or Print) Harry	v Elbert Be	a.V	DEATOO March	1952
SEX 6. COLOR OR RAC	7. MARRIED, NEVER MARRIED, WIDDWED, DIVORCED (Speelfy)	8. DATE OF BIRTH	9. AGE (In years If Under 1	
46.000	da	17 Jan 1878	7) Months	Days Hours M
USUAL OCCUPATION (Give kind of	work 10b. KIND OF BUSINESS OR IN-	11. BIRTHPLACE (State or foreign	n country) 1 12	CITIZEN OF WH
one during most of working life, even if ret	Peoria Fire Dept	Pontiac Il	linois Ü	SANTRY
FATHER'S NAME	VINDALAKARANIAN	14. MOTHER'S MAIDEN NAME	MANAMANA	HALL STATE
GEORGE BAY		MARTHA SPRINGER		
WAS DECEASED EVER IN U. S. ARM	IED FORCES? 16. SOCIAL SECURITY	17. INFORMANT MA	0 12 11 1	
s, no, or unknown) (If yes, give war or	면 1.40mm의 전 경기에는 취임하다는 경기에 가는 본 것으로 모든 경기 경기를 받는다고 있다.	a. Signature Ma So	I work	usa
no no	l no		1	
18. CAUSE OF DEATH		b. Address O	Hgts . ITLo. Relational	hip to the deceased
*This does not mean the mode of	dying, such as heart failure, asthenia, etc.	1850 MARON	d Homewood de	to lul
It means the disease, injury or	complication which caused death. ENTER		OR (a), (b), and (c). INT	ERVAL BETWEEN
NOVOVOVAVAVA			ON	SET AND DEATH
Direct cause (a) Corons	ary occlusion			
	ary occinaton			
			ur	known
Morbid conditions, if any,				
Morbid conditions, if any,	due to (b) Arterioscle	rosis		known
giving rise to the above cause (a), stating the		rosis		
ONE cause (a), stating the underlying cause last.		rosis		CANANA
giving rise to the above cause (a), stating the underlying cause last.	due to (b) Arterioscle: due to (c)	rosis		
giving rise to the above cause (a), stating the underlying cause last. II. OTHER SIGNIFICANT CONDITION Conditions contributing to the deat related to the disease or condition	due to (b) Arterioscles due to (c) NS th, but not causing death	cosis	Un	known
giving rise to the above cause (a), stating the underlying cause last. II. OTHER SIGNIFICANT CONDITION Conditions contributing to the deat related to the disease or condition	due to (b) Arterioscle: due to (c)	cosis	U n	iknown
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