

42547

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778 FEB 2 1978

STATE OF ILLINOIS

Medical Examiner

STATE FILE NUMBER

CERTIFICATE OF DEATH

☒ PERMANENT CERTIFICATE ☐ TEMPORARY CERTIFICATE		575 Dec 77		778 FEB 2 1978		Vol. ^M 78 - Page 2017	
REGISTRATION DISTRICT NO. 16-06		REGISTERED NUMBER		Medical Examiner		STATE FILE NUMBER	
DECEASED—NAME		FIRST		MIDDLE		LAST	
1. Calvin		1. Bunge		SEX		DATE OF DEATH (MONTH, DAY, YEAR)	
2. male		3. Dec. 12, 1977		RACE WHITE, NEGRO, AMERICAN INDIAN, ETC. (SPECIFY)		4. white	
5. 25		6. Sept. 18, 1952		7. Cook		8. Cook	
9. Palos Heights		10. U.S.A.		11. married		12. 319-48-4993	
13. Illinois		14. Du Page		15. Machine repair		16. Machine repair	
17. Illinois		18. Villa Park		19. 12 W. Terrace		20. 12 W. Terrace	
21. Richard		22. Bunge		23. Ethel		24. Anderson	
25. father		26. 15663 MacArthur Dr., Villa Park, Ill.		27. 15663 MacArthur Dr., Villa Park, Ill.		28. 15663 MacArthur Dr., Villa Park, Ill.	
29. Asphyxia		30. Drowning		31. Drowning		32. Drowning	
33. Accident		34. DEC 12 77		35. 4:10 P.M.		36. 4:10 P.M.	
37. NO		38. CRASH		39. Hermon		40. Hermon	
41. SIGNATURE		42. DEC 12 77		43. DEC 13 77		44. DEC 13 77	
45. PHYSICIAN'S SIGNATURE		46. DEC 12 77		47. DEC 13 77		48. DEC 13 77	
49. Burial		50. Chapel Hill West		51. Elmhurst, Ill.		52. Elmhurst, Ill.	
53. Ahlgrim & Sons Ltd. 567 S. Spring Rd., Elmhurst, Ill. 60126		54. Ahlgrim & Sons Ltd. 567 S. Spring Rd., Elmhurst, Ill. 60126		55. Ahlgrim & Sons Ltd. 567 S. Spring Rd., Elmhurst, Ill. 60126		56. Ahlgrim & Sons Ltd. 567 S. Spring Rd., Elmhurst, Ill. 60126	
57. 6269		58. 6269		59. 6269		60. 6269	
61. 6269		62. 6269		63. 6269		64. 6269	
65. 6269		66. 6269		67. 6269		68. 6269	
69. 6269		70. 6269		71. 6269		72. 6269	
73. 6269		74. 6269		75. 6269		76. 6269	
77. 6269		78. 6269		79. 6269		80. 6269	
81. 6269		82. 6269		83. 6269		84. 6269	
85. 6269		86. 6269		87. 6269		88. 6269	
89. 6269		90. 6269		91. 6269		92. 6269	
93. 6269		94. 6269		95. 6269		96. 6269	
97. 6269		98. 6269		99. 6269		100. 6269	

Return to Elvia Anderson
15663 MacArthur Dr., Villa Park, Ill. 60181

HEREBY CERTIFY THAT the foregoing is a true and correct copy of the death record for the decedent named at item 3 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 DEC. 14 1977

Barrington

SIGNED

Illinois. OFFICIAL TITLE

Sub Registrar

STATE OF OREGON; COUNTY OF KLAMATH; ss.

I hereby certify that the within instrument was received and filed for record on the 2nd day of February A.D., 1978 at 12:30 o'clock P.M., and duly recorded in Vol. M78 of Deeds on Page 2017.

FEE \$3.00

WM. D. MILNE, County Clerk

By Bernice H. Helach Deputy