

OFFICE USE ONLY

TYPE OR PRINT IN PERMANENT BLACK INK



CERTIFICATE OF DEATH

146 3 41302 LOCAL FILE NUMBER STATE FILE NUMBER

1. DISTRICT

2. SEX (M / F)

3. HOSPITAL

4. OCCURRENCE

5. RESIDENCE

6. TRACT

7. OCCUPATION

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20.

21. ACC LOC

22. QUERIES

23.

24.

Main form containing fields for name (CLARENCE JOE NICHOLAS), birthdate (Jan. 11, 1930), death date (November 16, 2003), residence (2331 Friendly Grove Rd.), and certifier information.

FOR INSTRUCTIONS SEE BACK AND HANDBOOK

DOH 110-008 (Rev. 7/91) (formerly DSHS 9-150)

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