

TYPE OR PRINT
PLAINLY WITH
UNFADING INK

THIS IS A
PERMANENT
RECORD

Below for State Office Use

A 48
B 1
C 48816
D —
E 7599
F 4
G 4
H 4
I 1
J —
K —
L —
M —
N —
O —
P —
Q —
R —
S —
T —
U —
V —
W —
X —
Y —
Z —

Disposition Permit
Issued / /
Provisional
Certificate
☐ Yes ☐ No

EMBALMER'S NAME GEORGE BALLARD

LICENSE No. 3793

FUNERAL DIRECTOR'S
SIGNATURE George Ballard

FUNERAL DIRECTOR'S
LICENSE No. 1774

FUNERAL HOME
No. 458

Local No. 205

INDIANA STATE BOARD OF HEALTH
MEDICAL CERTIFICATE OF DEATH

State
No. 77-008932

PERMANENT INK
SEE HANDBOOK FOR
INSTRUCTIONS

DECEASED—NAME		FIRST	MIDDLE	LAST	SEX	DATE OF DEATH (MONTH, DAY, YEAR)	
1. WARREN				JARRELL	2. MALE	3. MARCH 6, 1977	
4. WHITE	AGE—LAST BIRTHDAY (YEARS)	5a. 0	UNDER 1 YEAR MOS. DAYS	5b. 30	DATE OF BIRTH (MONTH, DAY, YEAR)	6. MARCH 6, 1977	
CITY, TOWN, OR LOCATION OF DEATH				7c. YES	7d. ST. JOHN'S HOSPITAL		
7b. ANDERSON		INSIDE CITY LIMITS (SPECIFY YES OR NO)		HOSPITAL OR OTHER INSTITUTION—NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER)			
8. INDIANA		9. U.S.A.		10. NONE			
11. INDIANA		12. MADISON		13. PENDLETON			
14a. INDIANA		14b. MADISON		14c. PENDLETON			
14d. 809 MIAMI DR.		14e. WAS DECEASED EVER IN U. S. ARMED FORCES?		14f. YES			
15. WILLIAM P. JARRELL		16. BEATRICE SWEET JARRELL		17. 809 MIAMI DR. PENDLETON IND. 46064			
18. WILLIAM P. JARRELL		19. FATHER		20. 809 MIAMI DR. PENDLETON IND. 46064			

PART I. DEATH WAS CAUSED BY:		[ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c)]		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	
10. IMMEDIATE CAUSE		(a) <i>congenital anomalies + defects in-con-</i>		10 min	
CONDITIONS, IF ANY, WHICH GAVE RISE TO IMMEDIATE CAUSE (A), STATING THE UNDERLYING CAUSE LAST		(b) <i>disturb with life</i>			
PART II. OTHER SIGNIFICANT CONDITIONS GIVEN IN PART I (A)		CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE		AUTOPSY YES <input type="checkbox"/> NO <input type="checkbox"/>	
				19a. YES <input type="checkbox"/> NO <input type="checkbox"/>	
				19b. YES <input type="checkbox"/> NO <input type="checkbox"/>	

DATE & TIME OF DEATH		MONTH	DAY	YEAR	HOUR	DATE SIGNED	MONTH	DAY	YEAR
20. MARCH 8, 1977						21a. <i>[Signature]</i>			
22a. 47356		22b. MECHANICSBURG		22c. MECHANICSBURG, INDIANA		22d. PHY. CODE NO.			
23. BURIAL		24. MECHANICSBURG		24c. MECHANICSBURG, INDIANA		24d. PHY. CODE NO.			
25a. BALLARD & SHIREY FUNERAL HOME 118 S 5th St. MIDDLETOWN, INDIANA		25b. HEALTH OFFICER'S SIGNATURE		25c. <i>[Signature]</i>		25d. DATE RECEIVED BY LOCAL HEALTH OFFICER			
25e. March 7th, 1977		25f. March 7th, 1977		25g. March 7th, 1977		25h. March 7th, 1977			